



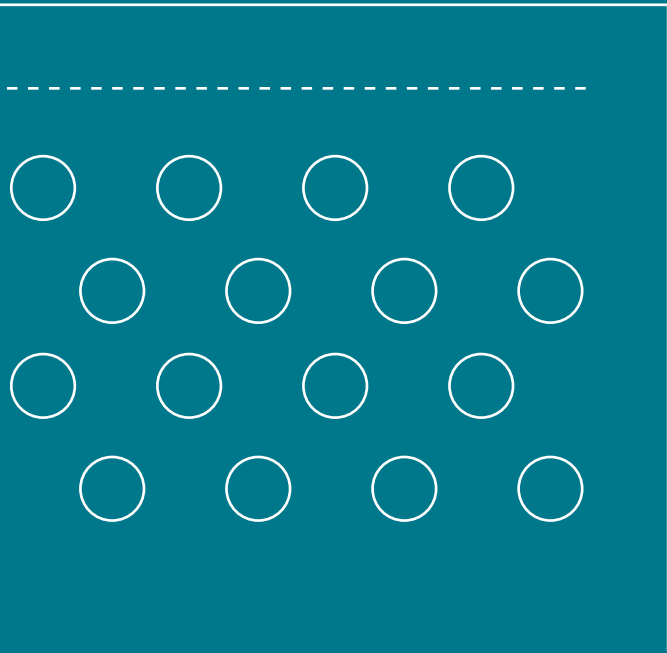
Self

Assessment

Document

October

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2017-18

Self Assessment: At a Glance

As a national health board, our role is delivery of education, training and workforce development to support a skilled, person-centred workforce which is well prepared to respond to the demands placed on our health and care services.

During 2017-18 we provided a wide range of initiatives and programmes which support national priorities and policy drivers including *Everyone Matters: 2020 Workforce Vision*, public sector reform, and health and social care integration.

An overview of some of our key achievements is presented below



To provide the future medical workforce to UK standards and improve the attractiveness of Scotland as a career destination, during 2017-18 we supported 6,000 trainee doctors in approximately 293 programmes. We continued to re-organise and re-align services to medical trainees and trained doctors on a Scotland-wide basis.

We implemented the lead employer model for NHS Grampian GP specialty trainees and enhanced our Trainee Programme Management system to support sharing of information. We also undertook a series of targeted recruitment campaigns and initiatives to promote medical training and support medical recruitment activities in Scotland.



To ensure improved learning environments through excellence in supervision, we delivered a range of initiatives including, in postgraduate medical training, improvements to the Scottish Training Survey, new appraiser events and trainer workshops, and introduction of a new process for Recognition of new Trainers; facilitation to support implementation of a new employer-led model of midwifery clinical supervision in NHSScotland including workshops and elearning; and in healthcare science, quality monitoring to support postgraduate training centre accreditation.



In line with our *Digital Strategy* to provide always available, personalised educational resources and services accessible from any device, we successfully implemented further enhancements to *Turas Training Programme Management*; migrated additional learner records and learning resources to *Turas Learn*; progressed development of *Turas People* to support the lead/host employer of doctors in Scotland; and successfully launched *Turas Appraisal* across NHSScotland.



To improve flexible access to multi-professional learning materials in support of the *Health Protection and Healthcare Associated Infection (HAI)* action plans, we continued to provide programmes and resources to support improvements in patient safety; supported NHS Boards to fully implement the *Scottish Infection Prevention and Control Education Pathway*; provided 400 in-practice infection control training sessions for dental teams across Scotland; and delivered clinical handover education sessions to 591 Foundation doctors.



To embed values and professionalism and enhance access to education for new models of care, we undertook initiatives to support person-centred care including a range of educational resources to enhance care for the bereaved; six regional masterclasses for dementia champions and ambassadors; new initiatives to support Childsmile core training and development; and resources, e-learning and national workshops to support the new Duty of Candour.



To improve access to learning, qualifications and education for healthcare support workers (HCSW), we continued to develop and deliver educational provision for the HCSW workforce including development of a suite of Digital Matters resources; launch of the NHSScotland SQA Qualifications Finder; a new innovative project on recognition of prior learning (RPL) and RPL publications and workshops; and delivery of the fourth national HCSW national learning and development event attended by over 200 delegates.



In support of the *Everyone Matters: 2020 Workforce Vision* we delivered a portfolio of leadership and management programmes across public services. We provided targeted programmes, initiatives and interventions underpinned by partnerships with the Scottish Social Services Council, professional and cross-sector bodies. *Our Leading for the Future* programme was attended by 144 participants; pilot programmes were delivered for the innovative *Scottish Coaching and Leadership for Improvement Programme* and we supported implementation of Project Lift, a new approach to executive level appraisal, leadership development and talent management across NHSScotland.

Introduction

We are a national health board responsible for education, training and workforce development for those who work in and with NHSScotland. We have a Scotland-wide role in undergraduate, postgraduate and continuing professional development and our mission is *to provide education that enables excellence in health and care for the people of Scotland*. We work to promote health and care in Scotland as an employer of choice and to support people to develop rewarding and fulfilling careers by enhancing their experience and delivering high-quality educational resources and learning environments.

We have a key focus in working collaboratively and the deployment of our expertise, resources and digital leadership to support the *Health and Social Care Delivery Plan*¹ and the triple aim of better health, better care and better value at a local, regional and national level. Our work in the areas of education and training, workforce planning, workforce systems, Once for Scotland services, and leadership and management reflect our continued commitment to transformational change and new models of delivery which cross traditional public services boundaries.

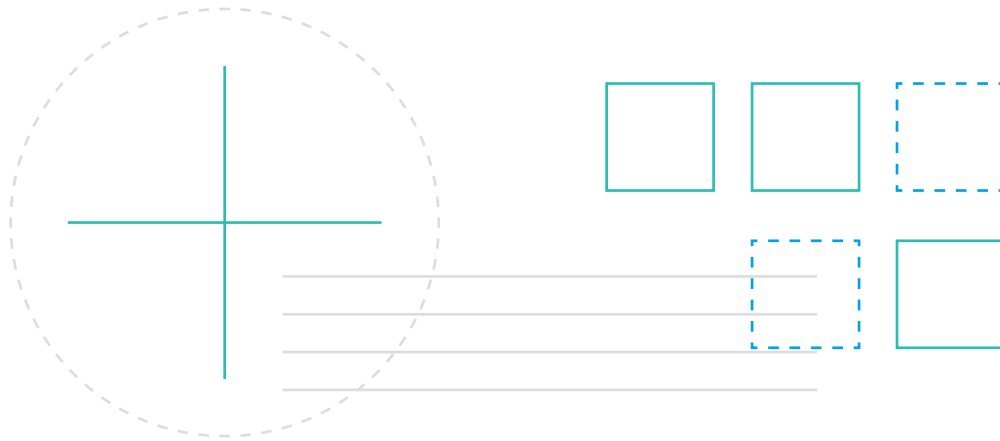
This document has been prepared for our 2018 Annual Review and illustrates a selection of our achievements during 2017-18 which support the *Health and Social Care Delivery Plan* and the quality ambitions of safe, effective and person-centred care². As well as national policy drivers, our work activities are also aligned to our *Strategic Framework for 2014-19*; *Local Delivery Plan 2017-18*; our *Digital Strategy*; *People and Organisational Development Strategy 2014-17* (extended to 2018); and our stakeholder priorities.

Our strategic framework sets out our work under five themes supported by planned impact outcomes (Appendix 2) and the nine key outcomes (Appendix 3) which describe how we will innovate in specific areas of our business to support public service reform and the workforce development

required to achieve the *2020 Vision*³. In addition to contributing to the aims of the *Health and Social Care Delivery Plan*, these themes and outcomes support delivery of the *National Clinical Strategy*⁴ and *Realistic Medicine*⁵.

Our *Local Delivery Plan 2017-18* was informed by the *Health and Social Care Delivery Plan*; the *Everyone Matters: 2020 Workforce Vision*; key national targets; and our stakeholder priorities. The *National Performance Framework* includes the target to *Increase Healthy Life Expectancy* and we have aligned with this through our work in mental health; children and young people; oral health improvement; support for people with care needs; and palliative and end of life care and bereavement.

We continue to demonstrate our support of the *Everyone Matters: 2020 Workforce Vision* and the key themes identified from our stakeholder priorities through our focus on patient safety, person-centred care, recruitment and retention; role development, leadership and management, and health and social care integration; as well as the six NHSScotland improvement priorities of: health inequalities and prevention; antenatal and early years; person-centred care; safe care; primary care; and integration.



This document contains many examples of innovation and digital leadership in our approach to education, training and workforce development, in particular, through our *Digital Transformation* we have demonstrated significant progress in developing and implementing digital capability for delivery of all our educational products and services. Our aim is to become truly digital by default, exploiting all opportunities to deliver educational solutions that support excellence in health and social care for the people in Scotland.

During 2017-18 we continued to develop and deliver our innovative corporate digital platform *Turas* to provide functionality for a suite of applications including training management, individual learning records, and digital learning resources and applications to support the health and care workforce. *Turas* has been built to be accessible by anyone who can benefit from it, regardless of their employer; this feature is particularly important to support health and social care integration.

The development and launch of our *Turas Appraisal* application in 2018 provides an appraisal system for health and care staff across the whole of NHSScotland. *Turas Training Programme Management* can now be accessed by all NHS Boards; and by trainee doctors, dentists and pharmacists with work in progress to migrate clinical psychologists and healthcare scientists onto the platform.

We have supported work to simplify the employment landscape for Scotland's trainee doctors and dentists with the development of our *Turas People* application and more learning modules have been made available on our *Turas Learn* application to enable sharing of resources across NHS Boards and beyond, to leverage economies and efficiencies of scale.

We have a key role in national strategic initiatives to support workforce and service transformation including workforce planning developments to support Scottish Government Health and Social Care Workforce Plan, Part One⁶. Our contribution to the development of the National Boards Digital Collaboration hub and the development and delivery of a strategic approach to NHSS business systems support the aims of Scottish Government *Digital Health and Care Strategy*.⁷

Our capacity and capability in building workforce facing applications, deploying cloud-based solutions and agile methodology led to, at the request of Scottish Government and with the agreement of our Board, establishment of the NES Digital Service (NDS) in June 2018. NDS will take forward the commitment in the *Digital Health and Care Strategy* to establish a single data platform for health and social care services in Scotland.

THEME 1

An Excellent Workforce

NES Key Outcomes

Outcome 1: A demonstrable impact of our work on healthcare services

Outcome 2: An excellent learning environment where there is better access to access to education for all healthcare staff (a 2020 Workforce Vision priority)

The recruitment and training of the healthcare workforce, underpinned by educational support networks which ensure the quality of the workplace learning environment, is a key element of our work. This section focuses on our work in partnership with NHS Boards, education institutions and professional and regulatory bodies to deliver education and training for doctors, dentists, pharmacists, nurses, midwives, allied health professionals, psychologists, healthcare scientists, optometrists, healthcare chaplains, healthcare support workers, and management trainees.

1.1 RECRUITING AND TRAINING KEY HEALTHCARE STAFF

To meet our planned outcomes in the recruitment and training of medical trainees to agreed UK standards, we supported 6000 trainee doctors in approximately 293 programmes and successfully progressed 817 Foundation Year 1 doctors through full registration into their second year. We filled 125 Scottish Clinical Research Excellence Development Scheme (SCREDS) posts for academic training in Scotland and recruited 982 trainees to postgraduate training.

We continued to re-organise and re-align services to trainees and trained doctors on a Scotland-wide basis. We implemented new single processes around annual review and progression, flexible working, transfers, and appeals. The Performance Support Unit became fully operational to provide standardised and best practice support across Scotland to doctors experiencing difficulty in their training.

Through our deployment of digital resources, we retained a focus on delivering a more consistent experience for trainees as they progress through training stages. Our digital platform *Turas* was further expanded with all foundation trainees within the Scottish Foundation School moving onto the platform, enabling integrated information flow across the training system, online learning and portfolio systems, minimising duplication and providing a single sign in.

In conjunction with trainee representatives and our Scottish Clinical Leadership Fellows we undertook work to explore improving medical trainee communication, and minimising repetitive data sharing processes. We also expanded our

role in coordinating, educationally approving, and promoting the International Medical Training Fellowships.

In August 2017 we introduced the lead employer model of General Practice specialty trainees (GPSTs) in NHS Grampian. We undertook work to develop digital solutions to support the lead employer model, enhancing our *Turas Training Programme Management* system (TPM) to enable sharing of information between trainees, placement Boards, and the employing Board. The lead employer model supports our outcome to deliver an improved recruitment and employment experience for doctors and dentists in training through a reduction in employment contracts and onboarding activity during their training.

We completed planning for our eighth Scottish National Medical Education Conference in April 2018, an international two-day event attracting world class speakers. The event incorporated the practice managers', medical appraisers', pharmacists', and nurses', midwives' and allied health professions' conferences. Over 1571 delegates registered to attend the event and a total of 58 workshops were delivered with positive feedback received.

In support of our outcome to raise the profile and attractiveness of Scotland as a place to train, we delivered innovative media campaigns including a suite of video case studies showcasing medical trainees in specialties across Scotland.

The Return to Practice Programme for Nursing and Midwifery was launched in 2015 and at March 2018, the total number of nurses and midwives enrolled on the programme was 446, with successful

completion by 294 participants, of which currently 240 have secured roles. During 2017-8, 116 nurses and 14 midwives commenced on the programme, 91 completed the programme and 32 secured posts. An evaluation of this work is underway.

Flying Start NHS[®], our national development programme for all newly qualified nurses, midwives and allied health professionals was revised and relaunched to reflect the changing health and social care landscape.

A total of 165 dental vocational trainees achieved satisfactory completion of curricula by July 2017. We provided 165.7 training posts for dental vocational training in 2017-18 and 128 core and specialty training grade dentists were recruited to post with access to study leave. We also provided ten dental hygiene therapy vocational training places and post-registration training to over 176 dental nurses to achieve enhanced skills beyond the minimum regulatory requirements. These activities contribute to providing a well-trained dental workforce to improve access to NHS dental services through quality assured programmes.

We continued to deliver the mandatory *Induction to Scottish Dentistry* in response to further regulatory changes in relation to eligibility to work in Scotland. Four courses were provided, and the training was successfully completed by over 100 dentists

who are now eligible to practice in Scotland. An additional bespoke rules and regulations course was developed in response to feedback and offered in March 2018 to those who had completed the mandatory training and had been established in practice for six months or more.

Our new Vocational Training Foundation Programme for pharmacists in community pharmacy was launched in September 2017. The launch marks the final stage in developing a Foundation framework for early career pharmacists working in any sector, with core as well as sector-specific competencies, and enables greater flexibility to meet the demands of primary care transformation, cross-sector working, and portfolio careers.

We commissioned and recruited to programmes for 60 clinical psychology trainees commencing October 2017 (57 clinical psychology trainees completed pre-registration training by December 2017); 30 MSc trainees in psychological therapies in primary care commenced in January 2018 (27 completed training by January/February 2018); and 19 MSc trainees in applied psychology for children and young people commenced in February 2018 (15 completed by January/February 2018).

We supported the final year of training for the 2013 cohort of child and adolescent psychotherapy trainees which was completed by December 2017 (five trainees) and recruited four new trainees to commence the four-year training programme in September 2017. Three trainee health psychologists commenced training in 2018 with four trainees completing training in January 2018. In addition a MSc neuropsychology programme was provided to approximately 35 staff. These activities will help ensure the NHS is provided with suitably trained professionals and the required numbers of applied psychology and psychotherapy trainees.

1.2 UNDERGRADUATE AND PRE-REGISTRATION EDUCATION

Our role in undergraduate medical and dental education includes management of the Additional Cost of Teaching (ACT) fund, the Scottish Government funding that covers the additional costs of teaching medical and dental undergraduate students within the NHS. This activity contributes to providing a high quality learning environment for undergraduates.

During 2017-18, we distributed ACT funding of £77 million to all NHS Boards and GPs in Scotland who are engaged in undergraduate teaching, using a model based on the number of students and the amount of teaching activity within each board. This funding supports the educational infrastructure as well as clinical placements and other direct teaching activity such as lectures, tutorials and teaching within clinical skills centres.

To provide a well-trained pharmacist workforce for NHSScotland, we successfully delivered the national Pre-Registration Pharmacist Scheme (PRPS) in Scotland with 187 trainees recruited to commence their training in August 2018 (2018-19 cohort) and 170 trainees in August 2017 (2017-18 cohort). In June/Sept 2017, a total of 97.6% of PRPS trainees who commenced their training in August 2016 (2016-17 cohort) passed the General Pharmaceutical Council (GPhC) registration assessment.

We provided the quality management function of the Pre-Registration Pharmacist Scheme (PRPS) for all 170 trainees during their training in 2017-18 on behalf of the General Pharmaceutical Council. In addition, we developed further quality management processes within the Pharmacist Foundation Training Programme for the 209 Foundation Pharmacists registered and in training, including the introduction of quality assurance processes as part of the assessment process and the convening of a multi-professional Assessment Board.

In 2017 we recruited 21 pre-registration clinical scientists (12 entered the Scientist Training Programme) and provided support to healthcare science programmes including: 70 clinical scientist trainees across different stages of development; 31 undertaking postgraduate-level development; and 18 NHS-employed clinical physiologist practitioners (NHS undergraduate) who were recruited to begin part-time academic programmes. These activities contribute to achieving an ongoing supply of healthcare science staff in NHS Scotland.

During 2017-18 pre-registration dental nurse training was successfully completed by 143 candidates ensuring a supply of fully qualified dental nurses eligible for GDC (General Dental Council) registration.

As part of our planned outcomes relating to performance management of pre-registration nursing and midwifery programmes, we commissioned a study to explore issues related to the under-representation of men in the nursing and midwifery profession. Our contribution included provision of data, facilitation of workshops and supporting the report of the CNO Commission on widening participation in nursing and midwifery education and careers

Flying Start NHS®, our national development programme for all newly qualified nurses, midwives and allied health professionals was revised and relaunched to reflect the changing health and social care landscape. Hosted on *Turas Learn*, our digital learning management system, key features of the refreshed programme include a learner-directed format, simplified content, and new guidance.

Since the launch of the new programme in October 2017, over 1,300 newly qualified practitioners (NQPs) have registered. The refreshed programme, which has been updated with input from stakeholders, will support practitioners to provide a valuable contribution to health and care during their first year in practice.

Work was undertaken to measure the impact of the Flying Start programme and a survey introduced at the start of the programme to gather data. Since the launch, over 300 NMAPH practitioners have submitted responses. This information provides a valuable insight into participant perceptions and is helping to shape national and local engagement strategies in collaboration with the Flying Start NHS Leads group which includes representation from sectors outwith the NHS.

In partnership with Health Protection Scotland and NHS Boards we supported the development of a placement scheme for trainee Environmental Health Officers within NHS public health teams. The placements will allow trainees to be placed in an NHS Board public health team for a maximum of six weeks.

1.3 THE WORKPLACE LEARNING ENVIRONMENT

A review of medical education in Scotland and the work of the Scotland Deanery was conducted by the General Medical Council (GMC) as part of their five-year programme of visits to assure the standard and quality of training throughout the UK. The review found several examples of exceptional or innovative good practice, highlighting in particular our digital strategy and inter-professional executive team leadership.

The review also identified that the Scotland Deanery demonstrated *a consistent approach to quality management* and that *the Deanery are aware of what is happening across Scotland and have robust systems in place for identifying and managing concerns over safety of quality*. The GMC report identified, in relation to the Scotland Deanery, two areas of good practice, three areas working well, two requirements and one recommendation.

We undertook a range of activities to support an improved medical training environment. We introduced changes to the Scottish Training Survey

(our postgraduate medical training end of post quality survey), and new guidance which supports improved data collection and analysis. We also contributed to the Sharing Health Intelligence for Health and Care Group which reviews NHS Boards to identify any early signs of system stress. Using data from our surveys we were able to provide feedback on training and education in individual NHS Boards and to contribute significantly to combined assessments for each NHS Board.

During 2017-18 we delivered eight new appraiser events attended by 98 clinicians and provided three refresher courses for 51 primary and secondary care doctors. This ensures a sustainable and clear system for doctors to review and manage performance, and to meet GMC requirements for revalidation.

We developed a new one-day trainer workshop for experienced educational supervisors with more than five years' experience in an educational role. We also piloted a new pre-CCT (certificate of completion of training) trainer workshop, offered to trainees in their final year of speciality training. Additional activities included revision of the *Approved Medical Practitioner Training Programme* material for Part 1 and Part 2 update training, and delivery of train the trainer courses in 2017 with the new material offered in 2018. Progress was made towards the introduction of a new process for the Recognition of new Trainers, and development of a new quality management/quality improvement process.

We facilitated work to support implementation in Scotland of a new employer-led model of midwifery clinical supervision. We developed an education package of workshops and e-learning, to prepare new and existing clinical supervisors for the transition to the new model. A total of 152 supervisors from each NHS Board completed training to equip them to roll out the new model from January 2018, with positive feedback on the learning materials and workshops received from participants. Assessment of the impact of

the new model of clinical supervision is currently being undertaken as part of a rigorous research project and early findings from midwives who have received the training are positive. A phased roll out of the clinical supervision model to nurses has been agreed by the Scottish Executive Nurse Directors.

An important element of our healthcare science work, was quality monitoring of training centres to assure that standards of training are consistent across postgraduate healthcare science disciplines. Our healthcare science team of principal leads commenced key work on postgraduate training centre accreditation. During 2017 the principal focus was monitoring the assessment of competency progression (ARCP) by trainees, and reviewing and improving training plans.

To support improved quality across learning environments for psychology trainees, we co-ordinated and quality assured 420 placements, including intensive support for supervisors and trainees. We completed 515 site visits and 330 end of placement reviews to monitor trainee competence and ensure continuity of assessment and quality assurance of placement supervision. A total of 196 annual learning reviews were undertaken involving trainee applied psychologists, line manager and clinical tutors, to review trainee development across employer and education systems. We also further developed ePortfolio to incorporate a placement planning process, and our reporting systems to support trainee survey of the placement environment and learning experiences.

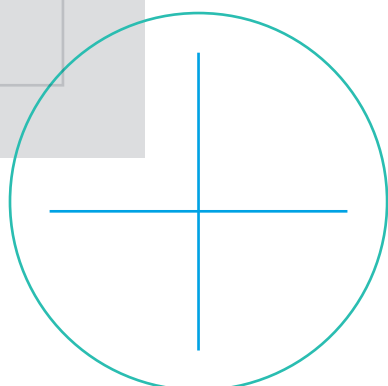
THEME 2

Improved Quality

NES Key Outcomes

Outcome 3: Flexible access to a broad range of quality improvement education in the workplace (a 2020 Workforce Vision priority)

Outcome 4: Leadership and management development that enables positive change, values and behaviours (a 2020 Workforce Vision priority)



We continued to work with our key partners and stakeholders to facilitate the quality improvement (QI) aspects of the 2020 Workforce Vision through the 2020 Workforce Vision Implementation Plan. This section also highlights the work we have undertaken to support improvements in safety through evidence-based research, development and delivery as well as clinical skills, healthcare associated infection (HAI), person-centred care and leadership and management to support integration.

2.1 SAFE, EFFECTIVE AND PERSON-CENTRED CARE

The principles of person-centred care are embedded throughout all undergraduate, postgraduate and CPD (continuing professional development) activities. During 2017-18 we provided a range of education, training and workforce development to support and enhance delivery of person-centre care.

We delivered a suite of educational resources to support bereavement care. We launched two e-learning modules on Medical Certification of Cause of Death, produced in conjunction with Healthcare Improvement Scotland, which focus on common mistakes and management of deaths in the community.

We further developed the Support Around Death website which provides a range of information for health and social care professionals and produced additional short animated films to augment the existing suite of animations. We hosted quarterly learning events for the NHS Board Bereavement Lead and Strategic Co-ordinator network across Scotland to provide an opportunity for sharing best practice in bereavement care and education on a national basis.

We supported NHS Boards to fully implement the *Scottish Infection Prevention and Control Education Pathway (SIPCEP)* foundation layer, a national approach to infection prevention and control for health and social care, launched in June 2017. The pathway modules, delivered online and available from the website, support different styles of learning and levels of digital literacy and are aligned with the National Infection Prevention and Control manual. At March 2018 there were 121,543 module completions across health and social care, and higher education.

The foundation layer of SIPCEP was incorporated into all nursing and dental undergraduate programmes and in several AHP and medical curricula. Modules will also be included in the curricula of schools of pharmacy and within clinical skills training. Interest has been expressed by further education colleges and the pathway is being integrated into health and social care courses.

We led on collaborative work with HIS, the Care Inspectorate and SSSC (Scottish Social Services Council), to deliver four workshops on Duty of Candour, targeting all health and social care staff across Scotland. The workshops provided information about the new procedures as well as a range of tools and techniques to support implementation, and attracted over 900 applications, with 480 places allocated, and 436 people attending the four workshops from across health and social care.

We provided a range of printed and electronic materials to support implementation of the new Duty of Candour including an interactive leaflet and a series of factsheets which have been disseminated to social care organisations and all NHS boards. A new e-learning module developed for health and social care services provides essential information on the new Duty. The module has been made available on all NHS Board learning systems, and has been shared with our partners, the Scottish Social Services Council and the Care Inspectorate, for dissemination to social care organisations.

We launched the Psychological Interventions Framework in September 2017 in collaboration with Scottish Government. Scoping was undertaken to identify training requirements for people with learning disabilities including training to enhance practice in evidence-based psychological therapies and development of coaching/supervision models

We delivered effective clinical handover education sessions to Foundation Doctors throughout NHSScotland with over 591 attendees across ten NHS Boards. On our six clinical skills resources hosted on LearnPro, we received over 5000 enrolments, with 2881 completing the resources in 2017.

to support implementation in practice. We also continued analysis of the *SWIFT* tool usage in primary care. Over 500 multi-disciplinary team staff accessed our *Emotions Matters* module by March 2018.

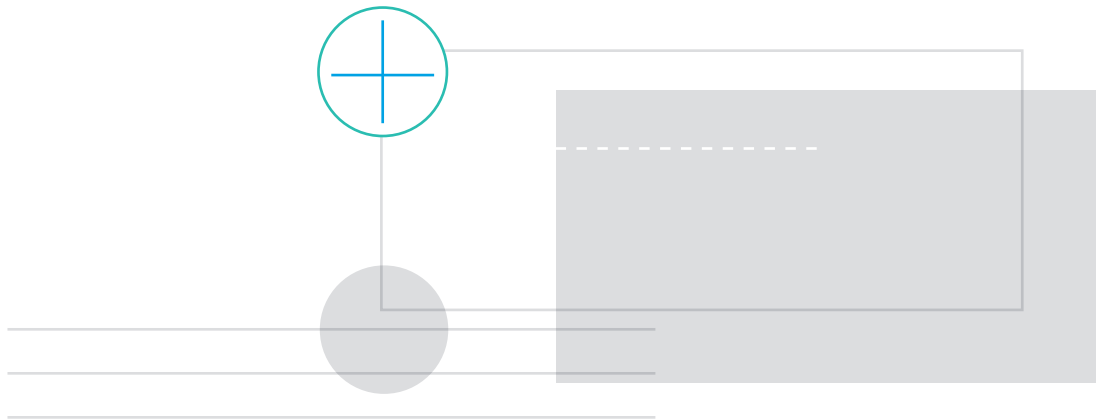
We produced blended learning comprising Developing Practice (DP) and Astley Ainslie Psychological Skills Education and Training (AsSET) training modules. Coaching materials for AsSET were developed and we rolled out the DP workbook. We supported trainers to deliver at least one DP or AsSET training session in their health board and to provide data centrally using implementation trackers. We also supported primary care innovations in person-centred approaches to long-term conditions by rolling out *COINCIDE* (Collaborative Interventions for Circulation and Depression) training materials for brief cognitive behavioural therapy (CBT) interventions in primary care.

In order to increase knowledge, confidence and skills in Human Factors approaches in different NHS contexts, we disseminated our work on behavioural aspects of Human Factors using different media, and continued to plan, implement, and deliver health behaviour change training to multi-professional groups. In our HAI and health protection work we applied our Human Factors

research on hand hygiene of medical students to the development and assessment of behaviour change interventions. We also applied learning from infection control work to other areas of practice and contributed to the development of training in this area.

We delivered effective clinical handover education sessions to Foundation Doctors throughout NHSScotland with over 591 attendees across ten NHS Boards. On our six clinical skills resources hosted on LearnPro, we received over 5000 enrolments, with 2881 completing the resources in 2017. Our Mobile Skills Unit undertook 24 separate visits to 19 different locations covering 12 different NHS Boards and was showcased at four separate conferences. We also reviewed and updated our Safe Communications online resource which encompasses five modules on safety and communication issues in health care practice.

We delivered 38 multidisciplinary workshops on addressing patient safety within complex healthcare systems using human factors and ergonomic principles and produced an introductory e-learning module on human factors/ergonomics. In addition we developed educational resources for safety and quality improvement methods in primary care to support vocational training and the new



Scottish GP contract. We also tested and verified the application of the Always Events patient-centred approach to quality improvement, and refined, tested and evaluated a safety checking system for the General Practice environment.

During 2017-18 we provided in-practice infection control training for dental teams across Scotland with over 400 sessions of training delivered across dental practices in Scotland. Our Scottish Dental Clinical Effectiveness Programme (SDCEP) continued to provide user-friendly, evidence-based guidance on topics identified as priorities for dentistry in Scotland and across the UK.

An updated edition of *Conscious Sedation in Dentistry* guidance was published in December 2017 and this has been endorsed by the dental faculties of the Royal College of Surgeons in the UK and Republic of Ireland and promoted by the Royal College of Anaesthetists. Work was also initiated to complete a revision of the *Sedation Practice Inspection* document, following publication of the SDCEP *Conscious Sedation in Dentistry* guidance.

An update of *Prevention and Management of Dental Caries in Children* was progressed, with publication due in 2018. At the request of the Chief Dental Officer, SDCEP undertook work to provide

advice on antibiotic prophylaxis against infective endocarditis that would be acceptable across the UK; and to provide advice and patient information to support implementation of the EU Regulation on the restriction in use of dental amalgam in specific patient groups.

In partnership with NHS Health Scotland, oral health improvement teams, and the Scottish charity *Let's Talk About Mouth Cancer*, we supported the *Caring for Smiles* national oral health initiative for dependent older people, to raise awareness of mouth cancer. Additional supporting resources were developed, including an instructional leaflet and demonstration video, with a *Caring for Smiles coordinators'* event hosted in June at which the initiative was launched.

The National Dental Conference was successfully delivered in March 2018. A key focus of the event was launch of the Oral Health Improvement Plan and the recently published action plan. The event was well attended by key stakeholders and colleagues from NHS Boards, Scottish Government and dental schools, and feedback was very positive. The next step will involve implementation of the action plan recommendations.

2.2 QUALITY IMPROVEMENT (QI) EDUCATION

Our work included a range of Qi initiatives to contribute to improving the delivery of safe, effective and person-centred care and efficient health and care services.

The Scottish Improvement Leader (ScIL) Programme represents an innovative approach to addressing the increasing demands across public services in Scotland by developing QI capacity and capability. During 2017-18, the ScIL programme was delivered to five cohorts of 149 participants in total; four cohorts from across public services and health and social care, and one cohort of nursing and midwifery staff to support the implementation of *Excellence in Care*.

ScIL has been endorsed by the Institute of Continuous Improvement in Public Service and was awarded the Annual Education award which recognises the inspiration and knowledge to lead improvement brought by the programme to those in leadership roles across Scottish public services.

The *Scottish Quality and Safety Fellowship*, now in its tenth year of delivery, has trained 222 Fellows to date to support clinical leadership across NHSScotland and beyond. The Fellowship supports healthcare staff with learning in leadership and improving the delivery of safe patient care. Cohort 9 completed the Fellowship in March 2018 with Cohort 10 due to complete in 2019; Cohort 11 is scheduled to commence in September 2018 resulting in a further 18 Scottish Fellows joining the network. This year's annual event in March 2018, *Thinking Differently, Inspiring Excellence*, was attended by over 100 current and previous Fellows and health and social care leaders from the UK, Ireland and Scandinavia.

A new virtual programme, *Scottish Improvement Foundation Skills* (SIFS), was launched in August 2017 to support individuals' skills, knowledge, and confidence to participate as active members in contributing to the improvement of local services.

SIFS is delivered entirely online, connecting people across the country, minimising time away from the workplace and reducing costs. The programme has been successfully completed by 152 participants; and due to significant demand cohort numbers were increased from 12 to 40 with six cohorts delivered throughout the year.

During 2017 our Quality Improvement learning resources were migrated to the QI Zone on *Turas*. A review was undertaken to streamline resources and align practical tools and elearning modules with the content taught on programmes.

2.3 LEADERSHIP AND MANAGEMENT

During 2017-18, we continued to contribute to the implementation of the *Everyone Matters:2020 Workforce Vision* and provide support for NHSScotland leadership and management priorities and national policy initiatives including the Quality Strategy.

In 2017-18 a new Leadership and Management Development Framework for health and care was designed and developed. Based on the concept of digitally enabled, commitment based, career long development, the framework was implemented as part of the launch of the Leadership and Management Zone on *Turas Learn*. This provides staff from across health and care with access to high quality resources, programmes, websites and e-modules from any device, anywhere, at any time.

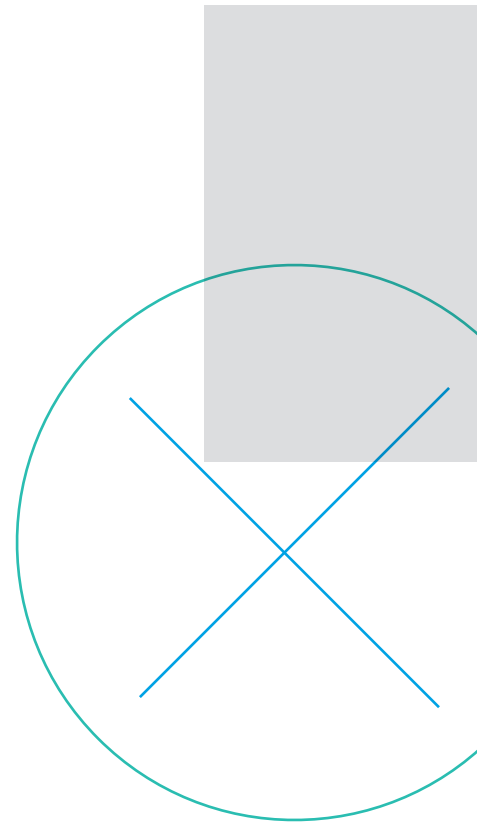
In collaboration with Scottish Government and partners we continued to develop and implement Project Lift, a new approach to executive level appraisal, leadership development and talent management across NHSScotland. The aim of this work is to establish a system-wide approach to identifying, supporting, enhancing and growing leadership talent at all levels in order to transform NHSScotland and its services, and improve the experience of those working in NHSScotland.

Following a successful investment proposal to Scottish Government we established a new centrally managed, nationally focused and regionally oriented team in the Organisational and Leadership Development department. The team will support the delivery of Project Lift across NHSScotland, and where possible to wider health and care environments.

In partnership with the Chief Nursing Officer Directorate we designed, developed, and delivered three pilot programmes of the innovative Scottish Coaching and Leadership for Improvement Programme (SCLIP). The programme combines the key capabilities of leadership with practice of supporting collaborative improvement teams in a coaching approach in service. The pilot stage worked closely with the Scottish Government Children's and Young People's Improvement Collaborative (CYPIC) to engage a range of participants from health, education and social care in a shared development experience.

In collaboration with RCGP (Royal College of General Practitioners) and SSSC Leadership for Integration we delivered packages of learning and support for those working at the interface of primary care, secondary care and social care, introducing a new online 360 tool accessible from *Turas* which focuses on the six leadership qualities for health and social care. We also continued to deliver *Leading for the Future* in partnership with other NHS Boards and partners, to 144 senior / middle managers and clinicians.

We provided multi-disciplinary (Pharmacist and GP) leadership courses for the *Taste of Leadership* (85 delegates). Two cohorts of senior pharmacy staff and GPs (47 delegates) attended an Advanced Leadership six-day programme and participants completed a project as part of the course to enable the sharing of practice, and improvement of practice throughout Scotland.



THEME 3

New Models of Care

NES Key Outcomes

Outcome 5: A key role in analysis, information and modelling for the NHSScotland workforce to strengthen workforce planning (a 2020 Workforce Vision priority)

Outcome 6: A range of development opportunities for support workers and new and extended roles to support integration (a 2020 Workforce Vision priority)

There are significant workforce challenges presented by changing demographics, increased public expectations, technological advancement and new models of delivering integrated care. This section describes specific areas of work where we support healthcare staff to deliver safe and person-centred care services that are increasingly delivered in the community as a key requirement of the *Everyone Matters: 2020 Workforce Vision*. We also deploy our knowledge of training and labour markets to support workforce modernisation and provide resources for health improvement, health inequalities, community hospitals and the remote and rural workforce.

3.1 PRIMARY CARE

As part of primary care transformation, we managed 836 CPD opportunities including short courses and university accredited modules for general practice nurses. To support the development of the refreshed district nurse role, we developed an online learning resource, and in 2017-18 funded 94 district nurses on accredited university modules and delivered five regional events attended by over 200 district nurses.

During 2017-18, in order to support CPD programmes for dentists and dental care professionals, we delivered over 250 CDP events with over 23,000 hours of verifiable CPD. Almost 4,800 places were offered with bookings of up to 3,800 received and almost 3,700 delegates attending. This included three whole team events, some of which were attended by up to 150 delegates, with one jointly organised with the SDCEP team in advance of publication of the *Prevention and Management of Dental Caries in Children*. All CPD events were mapped against the new development outcomes published by the GDC by December 2017.

We recruited 16 practice managers to the Professional Development Award in Practice Management and it is projected that this will increase to an intake of 32 in 2018 at minimal marginal cost. We also recruited over 40 candidates, including around 30 from medical practices, to the Professional Development Award in Dental and Medical Reception Skills.

Our Pharmacy team were once again shortlisted for the UK Royal Pharmaceutical Society award,

Excellence in Education, for their collaborative work with a number of NHS Boards in developing *Teach and Treat* services. The multi-professional training focuses on clinical areas of both local and national priority and enables inactive independent prescribers to gain new skills, competencies and confidence to manage caseloads of patients thus improving pharmaceutical care delivery and outcomes for patients.

In line with *Prescription for Excellence* and the development of pharmacists to work in General Practices across Scotland to support GP shortages, we commissioned *Independent Prescribing* training for 160 pharmacists, and *Consultation and Clinical Assessment* skills training for 470 IP trained pharmacists.

During 2017-18, we supported the development and membership of the four advisory groups required to progress implementation of the new five-year initial education and training programme for pharmacists in Scotland, in line with Scottish Government policy.

We provided a programme of local and national courses, e-learning and webinars for Autumn 2017 and Spring 2018 to support educational infrastructure and CPD requirements for pharmacists and pharmacy technicians across Scotland which included specific support for remote and rural learners.

We developed and delivered a distance learning pack *Improving Quality of Over The Counter Consultations* to all 1,255 pharmacies in Scotland as a second phase to our response to the Which? Report 2013. This was augmented by regional face to face events to support pharmacy teams with implementation.

A national e-learning module, *Pharmacy First*, was developed to support community pharmacy teams to provide better Out of Hours care through Patient Group Directions. We also provided a national educational framework for a further two cohorts (60 per cohort) of pharmacists/pharmacy technicians appointed to GP practice roles, which includes bootcamps, e-learning modules, a competency framework and a series of bespoke national webinars.

We commissioned and supported an additional three *Teach and Treat* service developments in NHS Boards during 2017-18 to support pharmacist-run independent prescribing clinics between secondary and primary care. One of the *Teach and Treat* services was commissioned for the first time to support pharmacists prescribing for acute common clinical conditions, contributing to treatment of patients in the community and reducing pressure on GP practices.

During 2017-18, we developed and launched a Foundation Framework and portfolio to support pharmacy technicians working in General Practice. The framework, developed in response to a gap in pharmacy technician education and development, consists of five generic core elements and three role-specific elements.

We provided Optometry CPD sessions to 495 individual optometrists, dispensing opticians and orthoptists through our Portal course booking system, and 55 Optometrists were funded to undertake a therapeutics course. Webinars on human factors were delivered as part of our optometry summer webinar programme. In line with our commitment to improving clinical leadership and management within community practice, we provided LaMP (Leadership and Management Development Programme) training for 18 optometry practitioners.

We undertook scoping work on the Independent Prescribing Optometrist community to identify the most appropriate methods to support our growing numbers of Independent Prescribers.

Our Peer Assisted Learning Network continued to expand with 17 groups meeting regularly across Scotland. We continued delivery of our online peer discussion groups to engage remote and rural practitioners. We also provided representation on the Continuing Education and Training reference group at the General Optical Council which is implementing change to the profession UK wide.

Our face-to-face training of Healthcare Science CPD opportunities comprising the Early Career Programme, Refreshing Leadership, Train-the-Trainer and Trainees-in-Difficulty was provided to around 200 attendees. Our face-to-face offerings were positively rated by attendees and for early career clinical scientist trainees this represents an essential component of their training portfolios.

We continued to play a key role in the transformation of nursing, midwifery and health professions' roles with the development of a structured, coordinated and future focused approach to education and career pathways from registration through to advanced and consultant practice. The first phase of this work focused on Transforming Nursing Roles, in particular developing a pathway and consistent approach to Advanced Nurse Practitioner roles. The focus is now on widening application to Allied Health Professions and Midwifery and to build on the strong education foundation established in phase one.

We provided educational support in line with the Scottish Government funded initiative to increase the number of Advanced Nurse Practitioners (ANPs) by 500 for primary care, mental health, acute and paediatric/neonatal settings by 2021. As part of the Postgraduate Diploma in Advanced Practice in 2017-18, 490 nurses undertook postgraduate modules with around 40 nurses qualifying as advanced nurse practitioners. The remainder of the group will continue to progress towards the final award in 2018-19. Recruitment commenced of additional nurses to begin postgraduate education in September 2018.

3.2 WORKFORCE DATA

We continued delivery of our Analysis, Information and Modelling (AIM) for Workforce programme to support the actions from the *Everyone Matters: 2020 Workforce Vision* Implementation Plan and to provide statistical analysis and workforce data to support workforce planning in NHSScotland. Through data tools, data analysis and reporting platforms, and dashboards, we provided support for workforce planning in dentistry, nursing and midwifery, optometry, psychology, and medicine.

During 2017-18, we developed and launched a Foundation Framework and portfolio to support pharmacy technicians working in General Practice.

During 2017-18 we provided analytical support for medical profiles, which support workforce planning in each medical specialty and combine information from several sources on medical training and employment. We redesigned, updated and extended the profiles, including the development of consultant projections for each specialty, which have been used by regional and national workforce planners for scenario planning. It is intended that the profiles will form one of the elements of the Health and Social Care workforce platform.

During 2017-18 pharmacy workforce analysis was undertaken which included HESA (Higher Education Statistics Agency) data on undergraduate and further education college students, PRPS (Pre-Registration Pharmacist Scheme) exit data, managed service data, community pharmacy workforce and pharmacist independent prescribers.

This work will help support future workforce planning for the pharmacy profession and the development of future new models of care.

Quarterly workforce and trainee data on psychology services, CAMHS (child and adolescent mental health) services, and psychotherapy was provided to inform psychology workforce planning and trainee commissioning. Data was also provided on the scope, reach and clinical outcomes of evidence-based parenting interventions to support six weekly review meetings, parenting programmes, PoPP-On initiative and target setting.

The *National Health and Social Care Workforce Plan* Part One, published in June 2017, assigned our organisation a key role in analysis, intelligence and modelling for the NHSScotland workforce to strengthen workforce planning, including the development of a workforce data platform. The new platform will support enhanced data and modelling around supply and demand, enabling integrated and collaborative workforce planning at all levels and across all providers. During 2017-18, work that was progressed against the target deliverables included a proof of concept data platform, stakeholder engagement activities and development of a briefing paper on nationally controlled student intakes.

3.3 SUPPORT WORKERS AND ROLE DEVELOPMENT

Work continued throughout 2017-18 on facilitating access to educational tools, resources and learning for healthcare support workers in support of the *Everyone Matters Implementation* Plan and to contribute to improved career development and succession planning.

The fourth national NHSS healthcare support workers event was held in February 2018. Over 200 healthcare support workers attended the event which was focused around the theme *Learning to Do Things Differently*, aimed at raising awareness of how participants could contribute to service improvement.

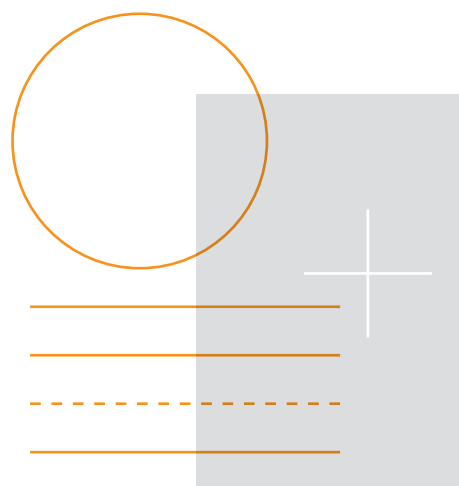
We continued to bring together NHS Boards, AHP career fellows and educational partners to consider key issues related to the development of clinical healthcare support workers (HCSWs). We delivered three stakeholder events to discuss career pathways and role development for clinical HCSWs, and worked with 50 delegates from 14 health boards, three education providers and one partnership organisation. One of these events was specifically aimed at the Allied Health Professions and the final event of the financial year included stakeholders from colleges and the Open University. We also led a successful regional collaborative working event with colleges and NHS Boards and will roll this out to other regions in 2019.

We began work in partnership with stakeholders on a national project for Recognition of Prior Learning to promote equality of access to learning for HCSWs. Our *Education Pathways* for all support staff was reviewed and digitalised as part of our work to support a range of education/learning networks to widen access and opportunities for HCSWs, leading to improved outcomes for service users.

We continued to support Boards to increase youth employment, and to promote NHSScotland as the employer of choice for young people through youth engagement activities and partnerships with schools/colleges. Further developments underway include expanding reach and impact, and working collaboratively to develop an integrated digital offering as we implement new national recruitment technologies.

We contributed to the development of Scottish Government *Digital Health and Care Strategy* including strategic objectives on developing workforce capability. This builds on our leadership role in cross-sector collaboration and the publication of research reports in the field of technology enabled care (learning needs); the first national technology enabled care learning resource for support staff; and digital skills for estates and facilities staff. Our work with hard to reach staff groups led to the development of a new programme, *Digital Matters*, with a suite of resources hosted on *Turas Learn*.

We contributed to the design of the HNC Facilities Management qualification in partnership with the City of Glasgow College and private enterprise. The SQA awarded qualification meets needs identified by employers in the industry and offers a development opportunity for NHSScotland Estates and Facilities Staff. The City of Glasgow College is the first college in Scotland to offer the qualification.



In collaboration with the Scottish Credit and Qualifications Framework Partnership (SCQFP), we undertook an innovative project, Getting it Right which aims to develop and roll out Recognition of Prior Learning (RPL) processes to support NHS staff to make the most of informal learning in the workplace. The project will also help NHS staff to identify their skills and compile portfolios to provide evidence and experience when applying for further or higher education courses at college or university. We produced two new publications to assist with the RPL profiling and evidence gathering process, and in conjunction with SCQFP, created and delivered bespoke RPL workshops.

In June 2017 we launched a one-stop website enabling support staff in NHSScotland to access information and advice about vocational qualifications to enhance their skills and support career development.

The NHSScotland SQA Qualifications Finder was developed in partnership with SQA and also enables people interested in a career in NHSScotland to identify the qualifications available for each different role. The site is updated regularly and contains details of a large number of qualifications from SCQF level 3 to SCQF level 11 categorised by job family from Business and Administration through to Pharmacy Services.

In 2017-18 we delivered 22 face-to-face Optometry courses, two online peer discussions and eight webinars. In addition we trained 26 level five and 10 level seven optical assistants on the *Worshipful Company of Spectacle Maker's Certificates in Optical Care* which supports care provided to General Ophthalmic Service patients. Our national Optometry conference was attended by 150 optometrists and dispensing opticians, and 89 optometrists attended our *Independent Prescribing* conference. Our mock OSCE (Objective Structured Clinical Examination) course for 34 pre-registration optometrists ran at capacity.

Three cohorts of 135 pharmacists and 27 pharmacy technicians appointed to GP practices commenced on the bespoke Pharmacy Learning Pathway comprising e-learning and attendance at national learning events, with pharmacists completing an Advanced Practice competency and capability Framework (APF), supported by *Turas Portfolio*.

The national knowledge and skills framework for Trauma and Complex Trauma, designed to help people working in the public and third sectors in Scotland to support those affected by trauma, their families, carers and supporters, was widely disseminated and 10,996 visits to the website have been recorded with around 1,000 people subscribing to the newsletter.

We developed a Trauma animation, informed by the skills and knowledge framework and the National Trauma Training Strategy. We also carried out research interviews to underpin the Scottish Trauma Informed Leadership Training, and the pilot for this training began in May 2018.

We provided a range of training and support for Children, Young People and Families. This included two-day Solihull Approach foundation level training for a total of 15 practitioners, a Solihull Approach train the trainer programme for 12 eligible practitioners, and two one-day training sessions for a mix of 56 Solihull Approach practitioners and PoPP (Psychology of Parenting Project) practitioners to develop shared understanding and integration of both models.

The full suite of PoPP-scheme start-up training days was delivered to 166 new PoPP multi-sector Early Years' practitioners in the Incredible Years® or Triple P® parenting programmes. We also provided: 46 authorised practice support/supervision sessions to 350 multi-sector Early Years' practitioners previously trained in the Triple P® and Incredible Years® parenting programmes; 18 Connecting with Parents' Motivations (CWPM) training sessions to 289 multi-sector Early Years' practitioners; and two training sessions in the Discussion Group Triple P® programme to 42 multi-sector Early Years' PoPP practitioners in established and new PoPP sites.

3.4 INTEGRATION, IMPROVING HEALTH AND TACKLING HEALTH INEQUALITIES

We delivered a range of activities to support the development of an integrated workforce through partnerships with organisations and bodies including Scottish Social Services, NHS Boards, Scottish Government and the third sector.

We co-hosted a national conference and graduation event marking the graduation of 147 health and social services Dementia Champions (Cohort 8), and 38 Dementia Specialist Improvement Leads (Cohort 2). Cohort 8 of the *Dementia Champions* programme was completed by 107 participants bringing the cumulative total to 857 graduates from the programme which continues to receive positive feedback.

Cohort 8 included staff from the Scottish Ambulance Service, NHS 24, community hospitals, and the first

participant from the Scottish Fire and Rescue Service. Cohort 2 of the *Dementia Specialist Improvement Leads* programme brings total numbers to date to over 60 and included for the first time, staff from the care home sector and the Care Inspectorate.

To further support Commitment 7 in the Dementia Strategy, six regional masterclasses were delivered for Dementia Champions, Social Services Dementia Ambassadors, and wider networks of trainers, with over 130 participants attending events covering areas including technology and dementia, ethical and legal issues and risk enablement.

A training programme specifically for the care home sector: *Essentials in Psychological Care – Dementia* was launched. The focus of the training is on proactive and preventative strategies for people with a diagnosis of dementia, developed for staff working at the skilled level or above within the *Promoting Excellence* framework.

During 2017-18 we delivered four coaching groups in *Psychological Interventions in Response to Stress and Distress* and provided training for care home staff in relation to *Stress and Distress* and a train the trainer programme. We also implemented training for 21 CAMHS clinicians on Applied Behavioural Analysis with children and young people with a learning disability.

We continued to support the development of knowledge, skills and attitudes of members of the dental team to deliver equitable patient care and improved oral health to patient groups that may have difficulty in accessing health care. This included the six-day core programme for 92 Childsmile dental nurses during 2017-18. The Adults with Incapacity training course was completed by 37 participants. In addition, pilot courses for intravenous and inhalation sedation for the public dental service and general dental service were also successfully delivered in 2017-18.

The accredited work-based module *Supervised Toothbrushing in Nurseries and Schools* SCQF Level 6,

developed in partnership with South Lanarkshire College (SLC) and NHS Lanarkshire, was delivered by SLC for a variety of students including 150 HNC in Childhood Practice students. This further supports Childsmile and nursery toothbrushing. Our Priority Groups workstream in partnership with the charity, Children's Health Scotland, supported the delivery of Childsmile to children with additional needs. Training delivered during 2017-18 for 81 extended duty dental nurses (EDDNs) and dental health support workers involved the use of dental playboxes to help engage children with the practical elements of Childsmile and the oral health message through play. This links to the *Keys to Life* strategy which focuses on reducing inequalities in healthcare for people with learning disabilities.

We delivered courses in Child Welfare and Wellbeing for 75 delegates across four of our five centres across Scotland. The training is aimed at all members of the dental team, and incorporates input from a dental-legal expert and a representative from the Childsmile programme, to support dental practices where the attendance and standard of oral health of children give concern.

Our Priority Groups workstream worked with partners to develop and deliver the oral health programme for dependent older people in care homes. An SCQF qualification in oral health, offered to care home staff, aims to increase knowledge and skills to enable them to embed effective oral care in residents' daily personal care. Latest figures show that 1,785 care home staff have successfully achieved the qualification with a further 816 currently in training, and 80% of all care homes in Scotland are now involved with Caring for Smiles.

The Family Nurse Partnership (FNP) programme continued to be delivered across Scotland in line with licence requirements and we remained on track to meet Scottish Government commitment that all NHS Boards who are in a position to deliver an FNP programme will be prepared to do so by 2019. During 2017-18, a total of 89 nurses and supervisors attended the core programme between

April 2017 and March 2018. The programme was also delivered to FNP participants from Norway and Northern Ireland. As well as the core learning, a range of CPD workshops were offered for 76 FNP delegates, and a learning and mentoring programme for new supervisors was delivered to twelve participants.

In addition to the ongoing design, delivery and evaluation of the core FNP Learning Programme and CPD, we delivered two pilot sessions of strength-based philosophy workshops to 30 health visitors, midwives and colleagues from higher education institutes. A follow up workshop was also delivered for those who wished to attend.

We developed a palliative and end of life care framework, *Enriching and Improving Experience* in partnership with the Scottish Social Services Council. The framework is underpinned by three sets of principles that promote a person-centred, outcomes-focused, human rights-based approach to palliative and end of life care, and was launched in May 2017.

At a joint conference event with Scottish Government, we launched an educational framework on psychological interventions for practitioners working with adults with learning disabilities in Scotland. The event was attended by over 130 health, social care and third sector professionals and service managers who responded positively to the launch of the Framework. The Framework explicitly builds on the framework *Equal Health* and the conference provided an opportunity for further promotion of this work and previous initiatives.

THEME 4

Enhanced Educational Infrastructure

NES Key Outcomes

Outcome 7: Improved and consistent use of technology with measurable outcomes for learning, user satisfaction, accessibility and impact

Outcome 8: Consistently well developed educational support roles and networks to enable education across the workplace

We continued to provide educational infrastructure to support postgraduate training and practice education as well as national clinical priorities, in particular for early years and mental health. This section also illustrates our work around delivery of a broad range of digital resources supporting improved access to knowledge, information and e-learning, enabling increased digital delivery of education as part of our *Digital Transformation*.

4.1 EDUCATIONAL SUPPORT ROLES AND NETWORKS

Since the introduction of the AHP Career Fellowship Scheme in 2010-11 we have invested in over 500 learning and development projects for AHPs across NHSScotland to support innovation, change and improvement that leads to better outcomes for people. During 2017-18 we provided support to a number of teams/individuals including four teams undertaking conversation/clinical decision-making training to embed this in practice; two teams to test this approach in adult services; and five AHPs to complete training to deliver *Good Conversations* locally. Support was also provided to evaluate the impact of service-wide implementation of *Good Conversations* in NHS Dumfries and Galloway.

We established a partnership with the Scottish Ambulance Service which will support the development of paramedical education which is fit for the future and enable a *Once for Scotland* approach across AHP education to ensure economy and efficiencies are optimised. Work was progressed to consider specific workforce education and development support needs and funding requirements. Our collaboration offers opportunities for improved access to learning for the paramedic workforce through existing resources and new initiatives including *Turas*; our NMAHP practice education infrastructure; transformation of primary care; prescription for excellence; *Transforming Roles* programme; and a technology enabled workforce.

We delivered a programme of face to face events across each NHS Board in Scotland and a national webinar as part of the Quality Improvement in Pharmacy Practice (QIPP) collaborative, to support quality improvement developments in pharmacy.

An Information Governance e-learning module was also developed to support community pharmacies.

During 2017-18 we developed a programme of webinars and video-conferencing to support access to education for remote and rural pharmacists and pharmacy technicians. We also commissioned provision of six elearning modules developed by the Centre for Postgraduate Pharmacy Education (CPPE) and collaborated with CPPE and Keele University to develop two virtual patient avatars to support pharmacists with complex consultations.

We delivered a wide range of educational developments to support improved capacity in psychological interventions and psychological therapies. Through PTTCs (Psychological Therapies Training Co-ordinators), we provided capacity to scope requirements, deliver training and support supervision, providing 42 courses to 666 multidisciplinary staff. We also assured Psychological Therapies training in Scotland, developed a quality assurance framework and guidance notes, and supported the roll-out of the Information Services Division (ISD) Psychological Therapies workforce survey.

To improve the quality across learning environments, training was provided in CBT supervision skills to 29 clinical psychologists; introductory supervisor training to 62 new supervisors; CPD to 51 experienced supervisors; and competence awareness sessions for nine health psychology supervisors. We supported the delivery of 122 Generic Supervision Competences in Psychological Therapies training places for High Intensity Therapists, and the delivery of 19 CBT specialist supervision training places.

We rolled out an e-module designed to allow practitioners to rehearse and benchmark their skills in using a standardised assessment tool to support effective feedback in CBT supervision (378 enrolled) and enabled access for 159 practitioners across NHS Boards.

In collaboration with Scottish Government and multi-sector stakeholders, we began to develop an Implementation Science informed Early Intervention framework with a project plan agreed with Scottish Government and wider stakeholders. We also delivered a roll out of Implementation Science training to multiprofessional staff (trainers) for CAMHS and Psychological Therapies.

4.2 DIGITAL CONTENT

In line with our *Digital Strategy*, we expanded our digital educational provision with new learning resources and applications, and continued our work to make our resources available on a wide range of devices through a single point of entry.

Work was progressed to provide enhanced functionality on our *Turas Training Programme Management* application to achieve a single system for the management of healthcare trainees. Trainee doctors, dentists and pharmacists were able to access their records and work was undertaken to enable access by clinical psychologists and healthcare scientists. We re-developed the Scottish Foundation School ePortfolio which is fully integrated on the *Turas* platform and this application was also launched for use in Wales, Northern Ireland and Malta.

We successfully migrated 7,000 from our Pharmacy user base in Portal to *Turas Learn* in June 2017. We developed two separate Pharmacy curricula accessible from *Turas Portfolio*, with corresponding resource libraries on *Turas Learn*, to support pre-registration training and General Practice Clinical Pharmacist development. Development of *Turas Portfolio* and *Turas Learn* resources for vocational training and pharmacy technicians is underway.

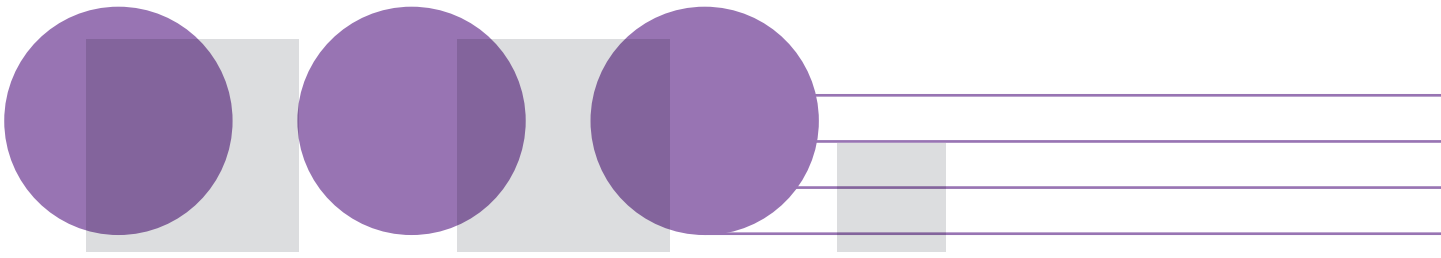
At March 2018 there were 58,000 users from across health and care registered to access services on our Knowledge Network. From April 2017 to March 2018, the use of subscription resources on The Knowledge Network by health and care staff rose significantly with 1,156,921 (662,033)* fulltext journal articles downloaded; 1,955,571 (1,216,627)* searches conducted; and 2,052,653 (67,097)* views of ebooks (* indicates 2016-17 figures). The increased numbers were achieved as a result of a series of enhancements including a new discovery service and improved user access. Over 4,000 users completed an evaluation survey with 90% reporting that the services provided by The Knowledge Network have had a positive impact on their work and the quality of services that they or the organisation provide.

We launched the Cognitive Rehabilitation in Dementia mobile application in December 2017. The app, the first of its kind in Scotland, aims to improve practice among health and social care staff in Scotland caring for people in the early stages of dementia, and to bring consistency to the cognitive rehabilitation process. The app complements a hard copy learning resource and twice-yearly workshops, and was shortlisted for two UK awards.

4.3 EDUCATIONAL INFRASTRUCTURE

Our Remote and Rural Education Alliance (RRHEAL) continued to implement a range of distance education tools and resources in order to increase access to high quality learning opportunities, and qualification and education pathways for the remote, rural and island workforce.

A new education network for rural practitioners was launched to support development of acute care skills around high dependency and critical care in rural hospital settings. Monthly video conference education sessions were delivered in a range of topics across the RRHEAL VC Education Network.



Our Remote and Rural Education Alliance (RRHEAL) continued to implement a range of distance education tools and resources in order to increase access to high quality learning opportunities, and qualification and education pathways for the remote, rural and island workforce.

Our Rural General Hospital (RGH) VC Education Network delivered a series of ten sessions on a wide variety of topics specifically tailored to meet the needs of RGH practitioners. RRHEAL undertook early adoption of *Turas Learn* and made available a host of educational resources through the platform.

The impact of our work on health and care services remained a key focus in 2017-18, and impact targets were recorded and measured for all initiatives in our Operational Plan. A large majority of the targets were aligned to one of the four types of impact (engagement, education/learning, performance and service) set out in our corporate impact framework. A high proportion of these targets (61.1%) related to service impact (such as improved clinical outcomes, better quality, improved productivity, cost savings) while educational impact (22.4%) and performance impact (16.3%) were a focus for educational and other activities. Over 90% of impact targets were achieved as planned, some of which relate to outputs and deliverables associated with longer-term service impact.

During 2017-18 examples of impact assessment highlighted contributions in engaging learners, improving knowledge and skills, enhancing performance, and improving service outcomes. The impact of our work on increasing access to psychological services indicated a positive effect on waiting times for CAMHS and other services.

An evaluation of the Scottish Improvement Leader programme demonstrated that 88% of participants felt confident in applying improvement thinking and tools at the leadership level, with 71% utilising these skills in their role. A survey of three of our leadership and development programmes provided evidence that participants responded positively to the programmes and demonstrated improved performance in areas such as relationships with team members, leading service change, and achievement of personal objectives.

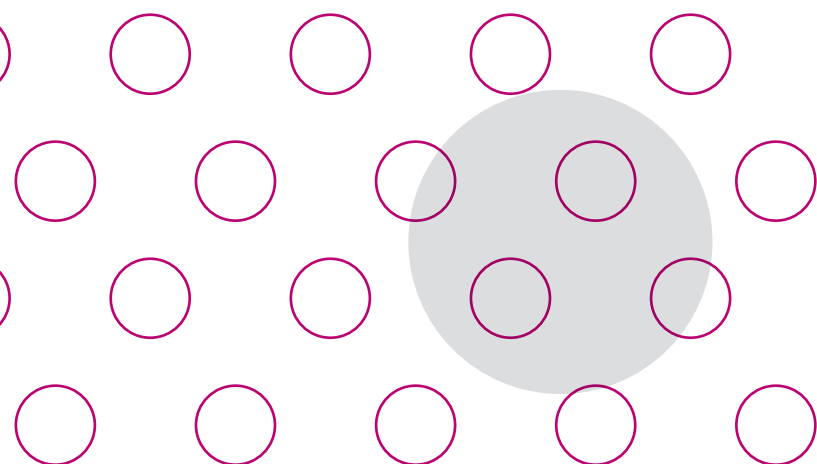
THEME 5

An Improved Organisation

NES Key Outcomes

Outcome 7: Improved and consistent use of technology with measurable outcomes for learning, user satisfaction, accessibility and impact

Outcome 8: An effective organisation where staff are enabled to give their best and our values are evident in everyday work



During 2017-18 we continued to focus on improving our systems, processes, workforce plans and structures in order to become more effective and to deliver our services in a more streamlined and consistent way. We delivered efficiency savings from activities that do not involve direct patient care and we progressed workforce, people and organisational development, digital and property strategies to support new ways of working.

5.1 SUPPORTING AND DEVELOPING OUR STAFF

During 2017-18 we refreshed our People and Organisational Development Strategy, Towards 2020: *Improving Our Workforce* which aligns with *Everyone Matters: 2020 Workforce Vision*, and our strategic framework and the collective ambitions of the eight national NHS Boards.

We conducted a review of our provision of leadership and management training, education and development which identified opportunities for greater consistency and improved sharing of learning resources; and in addition, the potential for collaborative planning, commissioning and review of financial resource utilisation. A new Leadership and Management forum has been established to progress actions and outcomes from this review.

We implemented the national iMatter engagement tool and provided support across the organisation to deliver action plans. We achieved high levels of engagement in 2017 with 81% of employees responding to the survey element of the process, resulting in an overall Employment Engagement Index score of 80%.

We delivered our year one objectives under our four-year equality action plan. The plan provides a clear, outcomes-driven focus for our equality activity which is mainstreamed into our operational plan and aligned to our strategic framework, and sets out the outcomes that are expected to be delivered together with guidance on the related activity and resource required.

We continued to exemplify all aspects of the Staff Governance Standard and developed refreshed equalities outcomes, an updated equal pay statement and our equality and diversity mainstreaming report.

We also continued to use and refine our staff equalities data, which provides effective intelligence for equality impact assessment and staff governance. These activities provided assurance that we are fulfilling the statutory duties of the Equality Act, to have due regard to the need to eliminate discrimination harassment and victimisation, and to advance equality of opportunity and foster good relations.

5.2 ORGANISATIONAL PERFORMANCE IMPROVEMENT

We continued to make significant progress in developing a more integrated and efficient organisation. We maintained a focus on organisational change, improvement and efficiency plans, and the development of new and improved ways of working with particular emphasis on digital solutions and web-based technology, supporting the organisation to respond efficiently and effectively to increasing demands for education and training across the health and care workforce.

We delivered a national recruitment, assessment and selection service for a wide range of vocational trainees, and national services including policy and processing for Tier 2 medical trainees and a national, single system service for the PVG (Protection of Vulnerable Groups) Scheme for doctors in training. We continued to play a lead role in the implementation of the lead employer model for medical and dental trainees across Scotland, including assuming the employer for all GP trainees throughout the whole of their education journey.

During 2017-18 we consolidated the new operating model for our Organisational and Leadership Development activities which focuses resources and objectives around four domains: Leadership and Management, Organisational Development,

Learning and Development and the measurement of Quality and Impact. The new model aligns with Scottish Government and stakeholder priorities across the health and care system.

We completed work on harmonising job roles to support greater transparency on grading and transferability of skills across our organisation. Harmonisation resulted in the reduction of 732 active job roles and 295 different job titles to a suite of around 50 job roles. This creates efficiency savings through a substantial reduction in job evaluation panels and development of job descriptions. We plan to build on the flexibility provided by harmonised roles to enhance career development opportunities for staff.

We developed a new People and OD Dashboard that provides aligned, real-time people management information which will be further developed in 2018-19. The cloud-based Dashboard also offers the potential to be utilised across other NHS Boards.

We progressed a range of initiatives aimed at delivering improvement by bringing together activities and products duplicated across the organisation to deliver a Once for NES/Once for Scotland approach. This included streamlining and standardising training programme management activities to deliver increased efficiencies; integrating our workforce data analysis activities to provide a more co-ordinated approach and become better positioned to support the increasing demand for workforce support; and the review of leadership and management resources to improve alignment, consistency and efficiency in delivery and provision.

Work was also initiated in relation to Women, Children, Young People and Families, Mental Health, Learning Disabilities and Dementia policy areas to improve effectiveness and efficiency through closer collaborative working. We also undertook a number of continuous improvement activities to support process improvement in different parts of the organisation.

5.3 EFFICIENT AND EFFECTIVE CORPORATE RESOURCES

We continued to make significant progress in the implementation of our *Digital Strategy* to deliver new digital services based on a single cloud-based platform providing an integrated, single point of entry system for users, transforming our approach to technology solutions for both our own organisation and NHSScotland.

In the course of 2017-18, we contributed to a number of national developments and strategic initiatives including the *Digital Health and Care Strategy*, developed in 2017-18 by Scottish Government and COSLA, which sets out how care in Scotland can be enhanced and transformed using digital technology. We also undertook a lead role in the co-ordination of the National Boards Collaborative Plan, working closely with all eight national NHS Boards, to support the requirements for new ways of working set out in the *Health and Social Care Delivery Plan*.

We provided executive-level representation to the *Digital Health and Care Strategy* Strategic Oversight Group and supported the Business Systems programme of work as co-sponsor with NHS NSS, leading the Business Systems roadmap and eRostering elements to inform development of a new generation of business systems for NHSScotland. This work is in alignment with the vision for NHSScotland Business Systems.

In further strategic initiatives we provided support to NHS NSS with their digital transformation and, in conjunction with NHS24 led the development of the National Boards Digital Collaboration hub which will support the implementation of the Health and Social Care strategy. In addition, we provided support to the Care Inspectorate in their digital transformation project which is leveraging *Turas* architecture and technologies to build an in-house digital platform. This allowed the Care Inspectorate to proceed to development stage, increasing the speed and efficiency of their delivery and one of the early developments will support Care Home of the Elderly inspections with a planned launch date of April 2019.

Work was undertaken to progress development of *Turas People* to support the lead/host employer model of doctors in training in Scotland. *Turas People* enables sharing of appropriate information between the lead employer and the host board and provides functionality including employee onboarding, in-employment functionality and integration with other HR and payroll systems and teams as appropriate. An intranet resource was also created giving trainees easy access to information relevant to their employment. This work supports the transition towards fewer employers of doctors and dentists in training (DDiTs), improving the working lives of DDiTs and substantially reducing administrative costs for both our organisation and other NHS Boards.

We delivered *Turas Learn* and migrated our e-learning modules in LearnPro to the new platform to support LearnPro licence cost savings and development work which will enable adoption of *Turas Learn* by NHS Boards, creating a potential cost reduction of around £400k across NHSScotland.

Turas Appraisal, an application for recording appraisals and personal development plans for health and care staff across Scotland, replacing e-KSF, was successfully launched for over 167,000 staff across NHSScotland. This development was achieved in a very short timescale and a wide range of stakeholders across NHS Boards were involved in the development and testing of the application. Over 20,000 NHSScotland, Agenda for Change staff signed up to the application in the first week.

We introduced a replacement corporate planning and performance system. Our new system integrates operational planning, performance management and improvement, equality and diversity, risk management, and audit data on a cloud-based platform. The system will create improved consistency, increased efficiency and cost savings. The introduction of a new room booking and management system, and a corporate dashboard will complete the final phases.

We delivered *Turas Learn* and migrated our e-learning modules in LearnPro to the new platform to support LearnPro licence cost savings and development work which will enable adoption of *Turas Learn* by NHS Boards, creating a potential cost reduction of around £400k across NHSScotland.

We progressed our work towards the ISO27001 information security standard and remained on target to gain full certification in 2018. We decommissioned Novell technology from our network in 2017 which will, through simplification of our internal digital infrastructure, lead to reduced operating and licensing costs. This work further enables our cloud transition strategy and will facilitate integration with other systems.

In 2017-18 we continued to progress delivery of the objectives of our Property and Asset Management Strategy, including the consideration of collaboration opportunities with other NHS Boards and identification of space rationalisation and commercial opportunities for both property and facilities services.

We achieved a reduction in footprint at our Aberdeen accommodation to create a modern, flexible environment which improves the experience for our visitors and staff at a lower operational cost. In addition, substantial progress was made to introduce a new room booking system across all sites. The resulting data will allow an enhanced understanding of the demands placed upon the properties and going forward, will inform our Property and Asset Management Strategy.

Appendix 1

References

1. Health and Social Care Delivery Plan (Scottish Government, December 2016)
2. Quality Strategy (Scottish Government, May 2010) outlines three quality ambitions: Safe, Person-Centred and Effective
3. The Everyone Matters: 2020 Workforce Vision has five priority areas: Healthy Organisational Culture; Sustainable Workforce; Capable Workforce; Integrated Workforce; and Effective Leadership and Management (Scottish Government, June 2013)
4. The National Clinical Strategy for Scotland (Scottish Government, February 2016)
5. Realistic Medicine: Chief Officer's Annual Report 2014-15 (Scottish Government, January 2016)
6. Health and Social Care Workforce Plan, Part One (Scottish Government, June 2017)
7. Scotland's Digital Health and Care Strategy (Scottish Government, April 2018)

Appendix 2

Strategic Themes: Impact Outcomes for 2017-18

1. An Excellent Workforce

Strategic Theme	Impact
Recruiting and Training Key Healthcare Staff	<ul style="list-style-type: none"> • Successful recruitment to and progression through medical training programmes to provide future consultants and GPs, recruitment to UK standards, and Improved attractiveness of Scotland as a career destination. • A well trained dental workforce to improve access to NHS dental services through quality assured programmes. • A well trained general hospital pharmacist workforce ready for further specialist study and career progression. • Specialist healthcare science practitioners, clinical scientists, and higher specialist practitioners with common core attributes to ensure the ongoing supply of healthcare science staff.
Undergraduate and Pre-registration Education	<ul style="list-style-type: none"> • Additional cost of teaching (ACT) funds in medicine and dentistry to help NHS Boards provide a high-quality learning environment for undergraduates. • Increased knowledge and skills in the dental care profession (DCP) workforce to improve oral health and care. • Enhanced pre-registration education and the learning environment through performance management and quality improvement. • A Pre-registration Pharmacy Scheme (PRPS) to provide a well-trained pharmacist workforce for the NHS in Scotland • A sustainable Scottish programme to ensure the supply of preregistration healthcare science (HCS) practitioners in clinical technology.

1. An Excellent Workforce

Strategic Theme	Impact
The Workplace Learning Environment	<ul style="list-style-type: none"> Improved learning environments to ensure highly competent clinicians trained to regulatory standards through excellence in supervision and practice education supported by enhanced quality management (QM), quality improvement (QI) and educational governance. Improved patient experience supported by raised awareness of educational resources for practitioners and flexible high-quality education pathways for safe, effective and person-centred care. Improved retention through career advice, induction and returner programmes, flexible training, retainer schemes and support for performance.

2. Improved Quality

Strategic Theme	Impact
Safe, Effective and Person-centred Care	<ul style="list-style-type: none"> Embedded values and professionalism, improved person-centred care and enhanced access to education for new models of care. Increased knowledge, confidence and skills and fewer adverse events through human factors education (HFE), the Scottish Patient Safety Programme (SPSP) and flexible, high quality education pathways, clinical skills training and evaluation. Flexible access to multi-professional learning materials to enhance support of the Health Protection and Healthcare Associated Infection (HAI) action plans to provide a cohesive, integrated and progressive approach to workforce education
Quality Improvement Education	<ul style="list-style-type: none"> Increased use of Quality improvement (QI) resources and a health and social care workforce which is competent, confident and engaged in improving services through improved QI capacity and capability. Improved quality of care through better informed dental QI initiatives and improved compliance with guidance.

Leadership and Management

- Access to development for public service leaders and managers to improve cross sector working through dialogue and collaboration.
- Public service leaders and managers who adopt values driven approaches to improve care and to develop more effective working relationships.
- More open and honest conversations to improve performance, sustain good performance and tackle poor performance.
- Strengthening management at all levels with particular focus on middle management, talent management and succession planning.

3. New Models of Care

Strategic Theme	Impact
Primary Care	<ul style="list-style-type: none"> • Increased participation in education and training through continuing professional development (CPD) activities across professions. • Improved access for general dental practitioners (GDPs) and dental care professionals (DCPs) to a programme of CPD for registration. • CPD for community based optometrists and dispensing opticians to improve community eye care and help reduce referrals to hospital. • CPD for pharmacists and pharmacy technicians to ensure mandatory requirements are met and to support <i>Prescription for Excellence</i>.
Workforce Data	<ul style="list-style-type: none"> • Enhanced national workforce data on which to base workforce numbers and improve decision making on commissioning, funding, performance management, recruitment, succession planning and modernisation.

<p>Support Workers and Role Development</p>	<ul style="list-style-type: none"> • Improved access to learning opportunities, qualifications and education pathways for healthcare support workers (HCSW) to support better career development and succession planning. • Learning to meet service and personal development needs, enhance consistency and support change, improvement and innovation. • National and sustainable education for improved clinical service delivery, and patient care and safety through practitioner role development.
<p>Integration, Improving Health and Tackling Health Inequalities</p>	<ul style="list-style-type: none"> • Continued development of the cross-sector reach of dementia education to improve quality of care and quality of life outcomes for people with dementia and families and carers, focusing on infrastructure development and impact evaluation. • Improved social and emotional development for young children with behaviour problems through better workforce capacity in parenting interventions across sectors. • Reduced health inequalities for vulnerable children and families through education and role development to enhance understanding of the Children and Young People's (Scotland) Act (2014) and improved capacity, capability and access to learning resources for children, young people and families. • Sustainable and enhanced practice education and capacity to improve the health and wellbeing of people and the use of inquiry based approaches for the workforce across health and social care. • Better cross-sector reach of multi-professional education to improve quality of care and quality of life outcomes through increased knowledge and skills and enhanced impact assessment to inform future developments. • Better oral health for older people, children and the homeless, improved access to services and better awareness of child protection and safeguarding.

4. Enhanced Educational Infrastructure

Strategic Theme	Impact
Educational Support Roles and Networks	<ul style="list-style-type: none"> • A well-developed network of medical trainers supported by continuing professional development (CPD) and annual appraisal. • Sustainable and enhanced NMAHP practice education infrastructure of Practice Education Co-ordinators (PECs), Practice Education Leads (PELs), Practice Education Facilitators (PEFs) and Care Home Education Facilitators (CHEFs). • Practice education improvement supported through Practice Education Coordinators (PECs) and Educational Development Facilitators (EDF) from the service. • Improved capacity and capability in psychological interventions and psychological therapies through well trained trainers and supervisors.
Digital Resources	<ul style="list-style-type: none"> • Quick and easy access to knowledge services through TURAS to support safe, high quality care. • Access to relevant digital content while we implement our Digital Transformation.
Educational Infrastructure	<ul style="list-style-type: none"> • Improved access to learning, better identification of training needs, enhanced confidence in development discussions and easier to use guidance. • Increased access to learning opportunities, qualifications and education pathways for the remote, rural and island workforce. • Community based Teach and Treat centres delivering dental and optometric care and outreach teaching, and improving the skills of practitioners. • Increased awareness, involvement and application of impact assessment and research in healthcare improvement that provides data to inform our decisions, policy and practice.

5. An Improved Organisation

Strategic Theme	Impact
Supporting, Developing our Staff	<ul style="list-style-type: none"> • A workforce plan and workforce data that anticipates our future requirements and is aligned with corporate objectives. • A continuously improving work environment evidenced by high levels of employee engagement. • Equality mainstreamed into all areas of business. • Learning and organisational development (OD) which helps our staff perform to their potential, aligns individual performance with organisational aims, meets legal and mandatory training requirements, supports career development and develops our leadership and management capability.
Organisational Performance Improvement	<ul style="list-style-type: none"> • Improved business processes and national work streams supported by better integrated systems for decision making and control. • Improved information governance, digital development, single unified digital environment (TURAS) and service support to ensure continuity. • A new Finance structure with an internal shared service team, better integrated systems and well trained and motivated staff. • Harmonised job roles and HR processes to improve business performance, recruitment, payroll and transactional services supported by business partnering for the organisation through a time of significant change.

Efficient and Effective Corporate Resources

- Robust budget setting and financial systems to deliver statutory reporting and improved services for decision making and financial control.
- Financial transactions processed and staff paid within an effective control environment in compliance with national payment targets.
- Improved documentation, consistent application of contract terms and conditions and efficiency savings supported by better reporting.
- Increased use of innovative communication technologies, more proactive media relations, provision of national events and conferences and improved internal communications.
- Corporate planning, governance and performance improvement based on measurable impact which aligns with service need and national policy, and supports continuous improvement across our organisation.
- Improved corporate property and facilities management (PFM) services through continued implementation of the corporate PFM strategy.

Appendix 3

Quality Education for a Healthier Scotland, Strategic Framework 2014-19

Key Outcomes for 2014-19

1	A demonstrable impact of our work on healthcare services	<p>This outcome reflects our priority of being able to identify and demonstrate the value that our work adds to NHSScotland and beyond; assisting us in our understanding of what works, and enabling us to identify areas for improvement.</p> <p>By 2019 we aim to ensure that we have arrangements in place to set out the planned impact of educational activities in all programmes that support this type of analysis, and to evaluate the achievement of these impacts.</p>
2	An excellent learning environment where there is better access to education for all healthcare staff **	<p>This outcome focuses on improving the quality of the learning environment for all those who are training and developing their practice within NHSScotland and the wider social care setting.</p> <p>By 2019 we aim to have access to data that enables us to assess the quality of the learning environment in which placements for undergraduate and trainees are delivered; to be able to join up this information to provide an integrated and holistic view of the learning environment; and to have measures in place which demonstrate how our interventions have contributed to an improvement in the quality of the learning environment.</p>
3	Flexible access to a broad range of quality improvement education in the workplace**	<p>This outcome reflects our commitment to making quality improvement (QI) education available to all staff groups (clinical and non-clinical) to ensure that the workforce is supported to deliver QI activities on a day-to-day basis. By 2019 we aim to: have trained a total of 284 people in the Scottish Improvement Leader (ScIL) programme and to have supported a further 60 Fellows through the Scottish Quality Safety Fellowship (SQSF); ensure that unit specific modules on QI are available to staff across the entire workforce and quantify how many staff have completed these modules.</p>

4	Leadership and management development that enables positive change, values and behaviours**	<p>By 2019 we wish to be an effective partner, highly valued by Scottish Government and a wide range of stakeholders, in the design and delivery of innovative ideas, policies and initiatives that are scalable and deliver the capacity and capability the health and care sector requires to meet the leadership challenges arising through transformational change.</p> <p>We wish to be delivering on the Once for Scotland ambition, and across a wider platform of organisational and leadership development, digital by default, assessing impact, and continually improving our contribution at pace.</p>
5	A key role in analysis, information and modelling for the NHSScotland workforce to strengthen workforce planning**	<p>Although we are not responsible for workforce planning, we do have access to significant, and growing amounts of data about the trainee workforce, and increasingly about the way in which individual cohorts of staff are accessing training and development. This outcome reflects the importance of ensuring that best use is made of this data and the intelligence contributes meaningfully to workforce planning in NHSScotland, supporting Everyone Matters: 2020 Vision.</p>
6	A range of development opportunities for support workers and new and extended roles to support integration**	<p>Support workers represent around 40% of the NHSScotland workforce but have traditionally received very little training and development support. Our ambition in relation to this group of staff is to provide access to national learning pathways and sustainable learning and development opportunities. This outcome also recognises the need to ensure we have a national and coherent approach in relation to the development of new and extended roles which are identified by the service to enable an integrated team approach.</p>
7	Improved and consistent use of technology with measurable benefits for user satisfaction, accessibility and impact	<p>By 2019 we aim to be digital by default, exploiting all opportunities to deliver educational solutions that support excellence in healthcare for the people in Scotland. We will achieve this through demonstrating that we provide access to education for the entire NHSScotland workforce, whenever and wherever it is needed, and create intuitive and personalised services for all our users, with non-digital alternatives wherever needed.</p>

8	Consistently well-developed educational support roles and networks to enable education across the workplace	This outcome refers to our commitment to provide support and development to those based within NHS Boards and other employers who have a role in supporting training and education in the workplace for those working in and with NHSScotland. The commitment to provide networks and resources to develop these roles extends to those staff who are funded by us as well as those who are not.
9	An effective organisation where staff are enabled to give their best and our values are evident in every day work	By 2019, we seek to be an organisation where leadership, management and meaningful appraisal continually improve the experience, performance and development of our workforce and the performance of our organisation as a whole. We want to ensure that the work we do is focused on the user, makes the best use of technology, supports staff wellbeing and resilience, and ensures efficient use of resources.

** Indicates a 2020 Workforce Vision priority for NES



ALTERNATIVE FORMATS

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

