

Annual Delivery Plan 25-26																						
Recovery Driver	SG ADP Action Reference	NHS Board Deliverable Reference	Deliverable Summary	Q1 Milestones	Q2 Milestones	Q3 Milestones	Q4 Milestones	Risks and Issues - Category	Risks and Issues - Description	Controls	Q1 RAG Status (Red, Amber or Green)	Progress in Q1	Projected Q2 RAG Status	Actual Q2 RAG Status	Progress in Q2	Projected Q3 RAG Status	Actual Q3 RAG Status	Progress in Q3	Projected Q4 RAG Status	Actual Q4 RAG Status	Progress in Q4	
Please select from the drop down list :	Please select from the drop down list:	Please create your own reference code for this deliverable	Please include a brief summary of the deliverable, briefly outlining the intended action and what this will achieve in 25/26.	Please outline what you intend to have achieved by Q1	Please outline what you intend to have achieved by Q2	Please outline what you intend to have achieved by Q3	Please outline what you intend to have achieved by Q4	Please indicate the types of (risk/s) and/or (issue/s) impacting on delivery of milestones. Please choose all that are relevant from the list.	Please provide a short summary of (risk/s) and/or (issue/s) with a focus on cause and impact i.e. what is the specific area at risk and how will it impact on objectives/milestones.	Please summarise the key controls in place to manage the (risk/s) and/or (issue/s), to reduce the impact, or to reduce the likelihood of a risk from occurring.		Please outline what you have achieved in Q1			Please outline what you have achieved in Q2			Please outline what you have achieved in Q3			Please outline what you have achieved in Q4	
8. Workforce			<b>Further the National Endoscopy Training Programme</b> Further develop elements of the JAG accredited training programme for medical endoscopists, non-medical endoscopists and health care support workers. NHSIA is enhancing diagnostic capability and capacity through the NETP programme, particularly for Colonoscopy and Upper GI scopes. The programme includes upskilling courses, Train the Trainer courses, Endoscopy Non Technical Skills (ENTS) Training, Basic skills courses, along with the provision of immersive skills training. Courses are scheduled to run at locations throughout Scotland over the year. The accredited Assistant Endoscopy Practitioner Programme and Foundations of Endoscopy Practice programme for RN's will be offered for one cohort if there is demand from Boards.	Deliver upskilling for colonoscopy courses, basic skills courses, upskilling in upper GI courses and Train the Colonoscopy Trainer and Training the Endoscopy Trainer Courses. Deliver Immersion Training with early stage Trainees being prioritised. Deliver ENTS (Endoscopy Non Technical Skills) Training courses.  Deliver network forum for endoscopy nursing teams.  Continue cohorts of the National Assistant Practitioner Programme (Endoscopy)/ the Foundations of Endoscopy Practice programme for RN's.	Deliver upskilling for colonoscopy courses, basic skills courses, upskilling in upper GI courses and Train the Colonoscopy Trainer and Training the Endoscopy Trainer Courses. Deliver Immersion Training with early stage Trainees being prioritised. Deliver ENTS (Endoscopy Non Technical Skills) Training courses.  Deliver network forum for endoscopy nursing teams.  Continue cohort three of the National Assistant Practitioner Programme (Endoscopy)/ the Foundations of Endoscopy Practice programme for RN's.	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Other - Use of passports for faculty to deliver training in a number of Boards without having to complete each Boards recruitment and on-boarding processes for each Board. Honorary contract processes.  Other - Sufficient faculty to deliver all programmes.  Other - Hotel for travelling faculty: costs and availability for training, for example the portable simulator for ENTS.	Inability to secure staffing resources to run clinical training courses.  Some SLAs for sessional faculty and workstream Leads have been difficult for Boards to implement. Some faculty have not had SLAs renewed where they had not been able to commit to the agreed time.  Inability to release faculty for training due to service demands and growing waiting lists.  Expectation management is an issue with Boards and Training Programmes seeing NETP as a permanent solution that will provide the bulk of training indefinitely.	Release of clinicians to honour SLAs is challenging for Boards and NETP focuses on communicating the benefit to the Boards and improvement in outcomes.  Improvements to the website infrastructure in Q1 23/26 have enabled addition of video content and easier navigation for users.  We need to communicate clearly and consistently that NETP is an improvement project, but Boards are still expected to provide training. The trainers that have been upskilled through NETP programmes should have increased the quality and capacity within Boards to provide training.	Green	We have delivered courses as planned, but have swapped some upper GI courses for colonoscopy courses to the patient allocation in GI. We have delivered Immersion Training with early stage Trainees being prioritised. And we have delivered ENTS (Endoscopy Non Technical Skills) Training courses.  The network forum for endoscopy nursing teams has continued to meet and provide peer support as well as education from the NETP team.  Continued cohorts of the National Assistant Practitioner Programme (Endoscopy)/ the Foundations of Endoscopy Practice programme for RN's.			We have delivered courses as planned, mainly focusing on colonoscopy courses to tie the patient allocation in GI. We have delivered Immersion Training with early stage Trainees being prioritised. And we have delivered ENTS (Endoscopy Non Technical Skills) Training courses.  The network forum for endoscopy nursing teams has continued to meet and provide peer support as well as education from the NETP team.  Continued cohorts of the National Assistant Practitioner Programme (Endoscopy)/ the Foundations of Endoscopy Practice programme for RN's.	Green	Green	We have delivered courses as planned. We have delivered Immersion Training with early stage Trainees being prioritised. And we have delivered ENTS (Endoscopy Non Technical Skills) Training courses.  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8. Workforce			<b>Deliver much of the National Clinical Skills Programme for Pharmacists</b> (Independent Prescribing for Community, Primary and Secondary Care Pharmacists) Act as delivery partner of Dundee Institute for Healthcare Simulation to ensure adequate numbers of places are provided in Scotland. Ensure course materials and resources for National Clinical Skills Programme for Pharmacists are available and relevant. Recruit and replenish faculty to deliver programme within NHS Scotland Academy at NHS Golden Jubilee site to share the workload of delivery. Deliver around five days of clinical skills training days for 11 months, with 12-15 learners a day, creating 660 - 825 learner places. Explore the role of NHSIA in supporting the changes in the pharmacy profession, developing business cases and delivering projects if approved.	Deliver around 365-206 learner-places each quarter, over 5 days most months with 12-15 places each day.	Deliver around 365-206 learner-places each quarter, over 5 days most months with 12-15 places each day.	Deliver around 365-206 learner-places each quarter, over 5 days most months with 12-15 places each day.	Deliver around 365-206 learner-places each quarter, over 5 days most months with 12-15 places each day.	Workforce - people need to be able to attend the training days  Unavailability of faculty and/or training rooms  Pharmacists do not engage in programme (self-referral)  Added Q1 25/26 - concern over changes to content delivery as educational governance for this programme sits outwith the Academy	Provision of Clinical Skills Training Programme addresses this risk independently prescribe and diagnose / treat minor ailments  Accommodation booked within NHS GI (Conference Hotel)  Promotion undertaken by Dundee Institute of Healthcare Simulation. Promotion within professional networks and fora.	Green	We delivered 12 days of training as planned and added in an additional 11 days of training to help meet the needs of the University of Dundee. This over-delivery has, however, put pressure on staff resources within the Academy and for Q2, 3 and 4 we intend to deliver 4 days per month as per this ADP to ensure we are able to make sufficient progress across all programmes.			We are now adhering to our delivery plan and only running up to 4 training days a month. This has made the income more predictable for our finance colleagues in NES.			As noted for Q2, we are now adhering to our delivery plan and running up to 4 training days a month.			We are continuing to adhere to our delivery plan and are running up to 4 training days a month.		
8. Workforce			<b>Perioperative Workforce Programmes</b> The four programmes developed in 2022/23/24 will run with the following cohorts each in 2025/26: Foundations in Perioperative Practice Programme: 2 cohorts (concurrent with APP) of 8-12 learners (registered Nurses). Surgical First Assistant Programme: 1 cohort of 8-12 learners (registered Nurses). Accelerated Anaesthetic Practitioner Programme: 2 cohorts of 8-12 learners (registered Nurses). A third co-hort may be added in year if demand is there. Assistant Perioperative Practitioner: 2 cohorts (concurrent with PPF) of 8-12 learner (at band 2-3, to move into a band 4 role). Decontamination Training: 2 cohorts	Surgical First Assistant Programme: Cohorts continue. Anaesthetic Practitioner Programme: Cohorts continue. Foundations of Peri Operative Practice Programme: Cohorts continue. National Assistant Perioperative Practitioner Programme: Cohorts continue. Decontamination Training: cohorts continue.	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Workforce - Retention of education faculty  The pipeline of learners (and their supervisors) is currently low so we will be paying attention to future planning and ensuring we do all we can to ensure cohorts run at full capacity.  High level engagement with SG workgroup group regarding place allocation, funding flow and ongoing agile review of workforce model and recruitment pipeline.  Standards for supervision have been established and are being referenced by SG colleagues.	We are delivering the perioperative programmes as planned, and are pleased with learner numbers for the Foundations of Peri-operative Practice/Assistant Practitioner in Perioperative Practice, and the Anaesthetic Practitioner programme. The Surgical First Assistant programme is highly valued by Boards but runs with small numbers and we are exploring accepting learners from other parts of the UK onto this programme for a fee to recover the cost of provision.	We are delivering the perioperative programmes as planned, and are pleased with full cohorts for the Foundations of Peri-operative Practice/Assistant Practitioner in Perioperative Practice, and the Anaesthetic Practitioner programme. The Surgical First Assistant programme is highly valued by Boards but runs with small numbers and we are exploring accepting learners from other parts of the UK onto this programme for a fee to recover the cost of provision.	Green	We are delivering the perioperative programmes as planned, and are pleased with full cohorts for the Foundations of Peri-operative Practice/Assistant Practitioner in Perioperative Practice, and the Anaesthetic Practitioner programme. The Surgical First Assistant programme is highly valued by Boards but runs with small numbers and we are exploring accepting learners from other parts of the UK onto this programme for a fee to recover the cost of provision.			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8. Workforce			Support for <b>NMC OSCC Preparation</b> NHSIA supports Boards who have recruited nurses from outside the UK, by helping the new nurses and their supervisors with preparation for NMC OSCCs. This helps the nurses to gain registration so they can practice independently as quickly as possible. Digital support for learning is provided for each of the 10 stations in the OSCC. Resources in Adult Nursing were released in Q2 2022/23 for MSc Nurses and Midwives in Q2 2022/23. A cultural humility resource was launched in Q3 2023/24.	Resources to be actively used by nurses and the educators supporting them, for nurses new to the UK in areas of adult nursing, MSc nursing and Midwifery (very low numbers expected in year). Resources to be updated each time the NMC make changes to the stations.	Resources to be actively used by nurses and the educators supporting them, for nurses new to the UK in areas of adult nursing, MSc nursing and Midwifery (very low numbers expected in year). Resources to be updated each time the NMC make changes to the stations.	Resources to be actively used by nurses and the educators supporting them, for nurses new to the UK in areas of adult nursing, MSc nursing and Midwifery (very low numbers expected in year). Resources to be updated each time the NMC make changes to the stations.	Resources to be actively used by nurses and the educators supporting them, for nurses new to the UK in areas of adult nursing, MSc nursing and Midwifery (very low numbers expected in year). Resources to be updated each time the NMC make changes to the stations.	Other - this project is dependent on the successful recruitment of new nurses by Boards/agencies	Update will be small as the numbers required are small: there will reach a point where the cost of updating the resource is greater than the benefit and we are watching for this.	Mitigations now sit with NES.	Green	810 people used this resource this quarter. Delivery has continued as planned with use of the OSCC resources reducing (102 in total this quarter) now that international recruitment has slowed down. In Q3 the Cultural Humility resource will be passed to the NES equities team to maintain as business-as-usual for the longer term. A project close document will be considered by FPG to this end.			Delivery has continued as planned with use of the OSCC resources reducing (102 in total this quarter) now that international recruitment has slowed down. In Q3 the Cultural Humility resource will be passed to the NES equities team to maintain as business-as-usual for the longer term. In the 18 months since launch, 4,146 learners completed the Cultural Humility resource.			Use of these resources has continued to decline along with international recruitment. Project close documentation will be considered by FPG in February with a proposal to transfer the resource to NES Social Care and Communities Directorate / NHS Team, with support from both NMAHP and NHS Grampian to maintain (NHS Grampian are still actively recruiting from outside the UK).  The Cultural Humility resource has now been passed to NES.			N/A - project closed last quarter	
8. Workforce			<b>Preparation for work in health and social care in Scotland</b> NHSIA has supported Boards and Social Care providers since winter 2021, by providing a digital resource that enables people new to roles in health and social care to be well-prepared. The resource is suitable to be used after interview but before starting work, whilst HR processes are underway, and it is a stop-gap resource whilst the national commission on induction for HSCWs is ongoing. This digital learning programme remains in use with positive feedback and an average of 200 new learners each month (and over 3,600 in total). An annual education review takes place and requested developments will be delivered.	Add additional quizzes for learners to check progress (requested by learners' feedback). 200 new learners to use resource.	200 new learners to use resource.	Develop and publish additional modules. 200 new learners to use resource.	200 new learners to use resource.	Other - the development of the new modules may slip down the priority list if other programmes need the limited resources for developing online education	There is a risk if the resource remains in use after the content becomes dated - this risk now sits with NES as we have transferred the resource.	Mitigations now sit with NES.	Green	2718 people used this resource this quarter. Annual review has taken place and revisions and additions are being made with anticipation that this project will be closed by NHS Scotland Academy within the year. We hope another provider will take on the maintenance of the resource for the longer term. We have for exceeded the original commission to accelerate onboarding to help ease winter pressures in 2021.			This project has now been closed and will pass to NES to run as business-as-usual from Q3. 16,808 learners had used this resource by the time it was passed to NES.			N/A - project closed last quarter			N/A - project closed in Q2	
8. Workforce			<b>National Ultrasound Training Programme</b> Increase Ultrasound capacity in NHS Scotland by supporting Boards to train ultrasonographers through a hub and spoke approach and use of dedicated practice educators, in partnership with Scottish Government, Glasgow Caledonia University and University of Cumbria. In 2025-26 the National Ultrasound Training Programme will continue with current delivery (anticipating 392 US examinations on 7413 patients through the training (sic)), and also offers immersive experience to medical trainees. Two cohorts will run in 2025/26 with 17 sonographers trained, along with 40 STs and 193 medical students (learners (or mixed discipline). Demand for training is prioritised by the needs of boards, their enrolled learners and patient waits.	Continue immersion training, reduce waiting lists by delivering over 2,000 procedures this quarter. Continue to include medical trainees in immersion programme.	Deliver immersion training, reduce waiting lists by delivering over 2,000 procedures this quarter. Continue to include medical trainees in immersion programme.	Deliver immersion training, reduce waiting lists by delivering over 2,000 procedures this quarter. Continue to include medical trainees in immersion programme.	Deliver immersion training, reduce waiting lists by delivering over 2,000 procedures this quarter. Continue to include medical trainees in immersion programme.	Workforce - Retention  This programme is funded through the SG Planned Care team as "non-recurring recurring", not to a very small risk of funding not being allocated.	Ability to retain a team of trainers with the right skills for all US procedures. Ability of our partner GCU to recruit future cohorts.	A team of several staff with different and complementary experience has been recruited. Communication about the positive learning experience of cohorts 1 and 2 is helping attract future cohorts. Evidence of acceleration of skills for scanning and reporting is a strong communication tool.	Delivered as planned with activity reported by number of patients (a change from our usual reporting of the number of procedures) to the SG planned care team. The reported figure in the June return for April and May is 1243 patients.	Green	Delivered as planned with activity reported by number of patients (a change from our usual reporting of the number of procedures) to the SG planned care team. The reported figure in the August return is 65 ahead of target.			Delivered as planned with activity reported by number of patients to the SG planned care team. The reported figure in the December return is 154 ahead of target.			Delivered as planned with activity reported by number of patients to the SG planned care team. The reported figure in the Final March return is 420 over target.			
8. Workforce			<b>National Bronchoscopy Training Programme</b> To improve lung cancer outcomes, NHSIA will develop curricula, and deliver training in basic bronchoscopy, and in endobronchial ultrasound and transbronchial needle aspiration of mediastinal lymph nodes over a three-year period (2023/24 and 2025/26). We will train 48 respiratory trainees in basic bronchoscopy and 36-48 senior trainees/SAI grade/Consultants in EBUS and TBNA.	Support learners using online resources, enable Bronchoscopy skills practice on local simulators - basic to advanced. Support use of EBUS Trans Bronchial Needle Aspiration (TBNA) simulation modules (eight hours of supervised practice in two four-hour sessions ideally separated by three months).	Support learners using online resources, enable Bronchoscopy skills practice on local simulators - basic to advanced. Support use of EBUS Trans Bronchial Needle Aspiration (TBNA) simulation modules (eight hours of supervised practice in two four-hour sessions ideally separated by three months). Run EBUS training day.	Support learners using online resources, enable Bronchoscopy skills practice on local simulators - basic to advanced. Support use of EBUS Trans Bronchial Needle Aspiration (TBNA) simulation modules (eight hours of supervised practice in two four-hour sessions ideally separated by three months). Run EBUS training day.	Support learners using online resources, enable Bronchoscopy skills practice on local simulators - basic to advanced. Support use of EBUS Trans Bronchial Needle Aspiration (TBNA) simulation modules (eight hours of supervised practice in two four-hour sessions ideally separated by three months). Run EBUS training day.	Workforce - Recruitment  Ability to maintain a faculty with the right skills to design and deliver the required curriculum. Ability of the faculty's employing Boards to release them on a sessional basis.  There is no established mechanism within JRCPTB to agree training pathways so we are exploring potential solutions as we would like national accreditation /endorsement.	Challenges for Boards in putting SLAs in place delayed the timing of achievement of milestones and SLAs will need to be extended to deliver this programme. This is within the current funding envelope for our programmes.  The Chair of Respiratory Specialty Advisory Committee of the Joint Royal Colleges of Physicians' Training Board has replied positively to our request for peer review of the training pathway, noting it covers the need. The training pathway will be implemented for resident doctors from the September rotation, with each geographic location within the Deansy piloting the pathway with selected residents. A date for a further trainees event has been set for December, and the next EBUS course is scheduled for March 2026.	Green	The pathway is being piloted with Respiratory Residents at ST4 from August 2025. Further upskilling and introduction to the pathway for trainees is planned for delivery in Q4.			We are continuing to run the pilot of this pathway with Respiratory Residents at ST4. Further upskilling and introduction to the pathway for trainees is planned for delivery in Q4.			We are continuing to run the pilot of this pathway with Respiratory Residents at ST4. Further upskilling and introduction to the pathway for trainees is planned for delivery in Q4.					
8. Workforce			<b>Accelerated Biomedical Scientist Portfolio</b> Delivery of an accelerated training pathway for BSc graduates to complete practical portfolio and achieve registration faster	Continue delivery of programme and quality enhancement as the first learners complete	Deliver accelerated programme	Deliver accelerated programme	Deliver accelerated programme	Workforce - Recruitment  Ability of Boards to recruit new BMS at the right time to join the training programme	The Programme will run shortly after graduation	Delivered as planned with the pilot co-hort having completed, cohort 1 progressing well and cohort 2 being recruited for a start in Q3. A stakeholder event was held at the end of Q1 and the enthusiasm for the programme was evident, with very positive reports from labs that have sent trainees on the programme.	Green	Current cohorts are achieving registration in an accelerated timeframe. A planned cohort from Q3 will not get ahead due to low numbers as Boards are not investing in this role, but are using lower-band staff instead. We are exploring this project.			We ran a series of workshops instead of a final cohort and we are progressing with transferring the resource to the BMS for long term use and maintenance. BMS have agreed that the resource will be transferred with an attributable, non-commercial license.			We have progressed with transferring the resource to the BMS for long term use and maintenance. BMS have agreed that the resource will be transferred with an attributable, non-commercial license.				
8. Workforce			Support for High Volume Cataract services To support the implementation of the Cataract (HVC) Blueprint through the development of digital resources to support technical skills for registered and non-registered staff in ophthalmology theatres	Deliver resources and monitor use, incorporate feedback into quality improvements	Deliver resources and monitor use, incorporate feedback into quality improvements	Deliver resources and monitor use, incorporate feedback into quality improvements	Deliver resources and monitor use, incorporate feedback into quality improvements	Other - People will need to actually use the resources	The resources have been requested from within Boards but we will not know take up until they are published - there is always a risk online resources will not be used	We co-created and used the NHSIA SALDR to ensure resources are relevant and meet the identified need	Green	Delivered as planned with resources having been used by 168 unique learners across all Boards this quarter.			Delivered as planned but with low update this quarter resources were used by 29 unique learners across all Boards this quarter.			Delivered as planned but with low update this quarter - resources were used by 29 unique learners across all Boards this quarter.			Delivered as planned but with low update this quarter - resources were used by 29 unique learners across all Boards this quarter.	
8. Workforce			<b>Anchor Institution Activities</b> NHSIA supports the parent Boards as Anchor Institutions. NHSIA does this by funding two support roles in the Youth Academy in NES, and by hosting activities within NHS GI.	Skills and Simulation Centre to host local schoolchildren for learning afternoon.	Prices Trust Learners to be hosted in Skills and Simulation Centre with activities provided by NHSIA educators.	Skills and Simulation Centre to host local schoolchildren for learning afternoon.	Prices Trust Learners to be hosted in Skills and Simulation Centre with activities provided by NHSIA educators.	Other	Ability to accommodate requested activity in addition to delivering NHSIA programmes	Mitigated by planning to make use of spare capacity at less busy times in programme delivery	Green	Visiting school pupils were welcomed into the skills and simulation centre on 17 June, for interactive sessions promoting potential careers and healthy engagement with healthcare.			A careers event was held for school pupils who were welcomed into the skills and simulation centre on 16 September, for interactive sessions promoting potential careers.			NHS Scotland Academy delivered two King's Trusts Enrichment Events for pupils from Vale of Leven High School and Clydebank High School. These sessions were held in our Skills and Simulation Centre at NHS GI and provided a structured and immersive introduction to healthcare practice, NHS values, and the broad range of roles within the NHS.			No activity in Q3 this quarter, continued funding of Youth Academy roles in NES.	
8. Workforce			<b>Ear Care (Introduction)</b> NHSIA will develop and deliver an accelerated training programme for micro-suctioning ear care training for registered nurses working in Primary and Acute Care, over two years ending 31 January 2028	Recruit Clinical Educator (1 WTE band 7) and develop resources as per SALDR	Develop resources and recruit first cohort, aiming for delivery to start and end of this quarter	Deliver programme for first cohort and evaluate use, incorporate feedback into quality improvements. Recruit cohort two.	Deliver programme and evaluate use, incorporate feedback into quality improvements, start recruiting cohort 3	Workforce - Recruitment  Recruitment of both Clinical Educator(s) and RN learners are risks for this programme. This programme will train trainers: creating the capacity for training to be rolled out in local areas but the decisions of regions in how they deliver ear care services is out of the scope of this programme	We will manage expectations about what NHSIA is delivering through this programme through clear communications: it's training for trainers only.	Recruitment processes have taken longer than anticipated as it is not complete at the end of Q1. We have adjusted the end date of the project by 9 months from the end of March 2027 to the end of January 2028 to ensure adequate time for recruitment of both staff and learners. Learning design and educational governance processes are complete.	Green	Recruitment processes have taken longer than anticipated as it is not complete at the end of Q1. We have adjusted the end date of the project by 9 months from the end of March 2027 to the end of January 2028 to ensure adequate time for recruitment of both staff and learners. Learning design and educational governance processes are complete.			Development is continuing as planned with a preferred candidate selected for the Clinical Educator role.			Development is continuing as planned with a Clinical Educator joining the Academy Team for this programme.			The programme launched as planned with the first cohort starting this programme in the West GI. The first cohort in the East(Grampian) will start within partners are ready to support service. Recruitment for the second cohort in the West is underway.	
8. Workforce			<b>Research and development of programmes</b> NHSIA responds to requests from SG sponsors and Board partners and is scoping projects to support accelerated training for groups including a cataract immersion training programme for ophthalmology residents, breathing pattern disorder training for physiotherapists and SALTs, and programmes for clinical perfusionists and echocardiographers. An initiation process is in place for new workstreams and 8 business cases for these projects are approved they will be added into the ADP template in year after business cases are approved.	Take scoping papers, SBARs and business cases through established governance processes when each stage of research is complete	Take scoping papers, SBARs and business cases through established governance processes when each stage of research is complete	Take scoping papers, SBARs and business cases through established governance processes when each stage of research is complete	Take scoping papers, SBARs and business cases through established governance processes when each stage of research is complete	Finance - Funding not yet agreed (or requested)  Workforce - Recruitment  Other - timely procurement	There may not be funding or availability of the people we need to deliver programmes that are commissioned in year, it may be difficult for service to release learners to take part in NHSIA programmes	Mitigated at project level as part of the initiation and commissioning process	We are progressing the development of new workstreams as/when capacity allows.	Green	We are progressing the development of new workstreams as/when capacity allows.			We are progressing the development of new workstreams as/when capacity allows.			We are progressing the development of new workstreams as/when capacity allows.			We are progressing the development of new workstreams as/when capacity allows.
8. Workforce			<b>Cataract Immersion Training Programme</b> NHS Scotland Academy will increase the amount of immersive training opportunities for doctors working towards achieving an Entrustable Professional Activity (EPA) in managing a cataract operating list allowing them to perform independent surgical lists as per the RCOphth curriculum.	Establish clinical governance and leadership within the boards where training will be delivered. Write job descriptions and adverts and put together the matching process, announcing the project and advertising roles as soon as possible	Establish details of roles and delivery in the North of Scotland. Recruit faculty and support role, establish start date. Work with NHS to recruit resident or SAS doctor for activity in 25/26. Work with Boards to establish theatre capacity and workforce to enable immersion training	Continue to work with Boards to establish theatre capacity and workforce to enable immersion training	Start 6-month training blocks in NHS GI in the February rotation of resident doctors	Finance  Workforce	Funding from Planned Care required for trainer PAs within the Academy, in parallel with funding of cataract activity and workforce within Boards.  Recruitment of trainers, resident/SAS doctors and a project co-ordinator are critical.  Release of residents for rotation/rota management.	Mitigated by small group planning meetings and building connections and relationships with all stakeholders to be trusted in this space. Treading softly to ensure all viewpoints are heard and influence the delivery of this programme.  Working to ensure that we complement and do not compete with planned training and activity in different geographies.  Exploration of the development of joint contracts.	Green	Funding of the trainer PAs has been confirmed and progress has been made to establish the governance of training programme within each location. Recruitment processes have been able to confirm the funding. NHS Highland need to proceed with appointing our faculty in Inverness.			The Job Matching process has successfully completed and the Project Coordinator and Faculty roles are all progressing through recruitment systems.			The Programme Manager has been recruited and should start in April 2026. We received no eligible applications from potential faculty members for GI and have not yet been able to confirm the funding. NHS Highland need to proceed with appointing our faculty in Inverness.			The Programme Manager will start in April 2026. We are waiting for confirmation of funding for NHS Highland to proceed with appointing our faculty in Inverness, and to re-run recruitment in GI.	