

**SWAG Secretariat**  
**Friday 24<sup>th</sup> January 2025**  
**14:00 – 15:00**  
**MS Teams**

**Attendees**

Confirmation of members in attendance at the time of writing:

<b>Name</b>	<b>Organisation</b>
Mary Morgan (Chair)	NHS National Service Scotland
Norman Provan	Royal College of Nursing
Gordon McKay	Unison
Elaine Watson	NHS Tayside
Steven Lindsay	Unite
Jacqui Jones	NHS Lanarkshire
Anna Gibson	Scottish Government
Fiona Hogg	Scottish Government

Additional attendees:

<b>Name</b>	<b>Organisation</b>
Zachary Deponio	Scottish Government
Diane MacLaine ( <b>Secretariat</b> )	Scottish Government
Catriona Hetherington	Scottish Government
Stuart Henderson	Scottish Government
Christopher Gore	Scottish Government
Kenny Nairn	Scottish Government
Laura Wilson	Scottish Government
Laura Tait	Scottish Government

Apologies from:

<b>Name</b>	<b>Organisation</b>
Jane Hamilton	Scottish Government
Gordon McKay	Unison



## **Agenda item 1: Welcome, Introductions and Apologies**

- Mary Morgan (MM) welcomes everyone to the meeting and minutes from 16 December 2024 are accepted by group as correct.
- MM confirms the meeting is quorate.

## **Agenda Item 2: Protected Learning Time (SWAG Subgroup) Monitoring and Evaluation**

- Norman Provan (NP) provides an update on the protect learning time subgroup and thanked Laura Tait and colleagues for their support and contribution to the paper.
- Agreement is part of the 2022 / 2023 pay award involving protected learning time as well as other non-pay elements. This was published in a DL and sent out to Health Boards which has been active since April 2024.
- Protected learning time for staff refers to time off for mandatory and statutory learning. Time off for additional, role specific learning is also granted.
- SWAG oversee this work and how to implement it in a practical sense, however, a number of issues have occurred.
- Learning employee passport, which was introduced during Covid, should allow for staff to transfer to another NHS Board and transfer their recorded via the passport, however, this has not been the case and staff must start from no recorded training meaning having to carry out the same training again. There has been an agreement to work together through the subgroup so that learning in one Health Board is compatible with another, to transfer the employee learning data.
- It is clear from the learning leads network there is an appetite for a consistent approach across all Boards like the Once for Scotland policies so that the content is the same, however, this brings the challenge of a significant piece of work to undertake. There are currently different versions of training in Boards, for example, fire safety. There is now work being progressed to create one module for each of the nine core modules.
- Learning leads network tasked to gather information from policies and propose which one to use to create the core modules.
- There is an issue relating to the reporting platform; Boards do not have a single platform whereby the learning is recorded. Many use 'TURAS learn' and nine Boards use 'LearnPro' and both systems do not interlink, resulting in information lost when a staff member moves between Boards.
- NP acknowledged that individual Boards may have other specific learning that they wish to put in place, therefore, the proposal has been put forward that in future should a Board develop something new, it could go to the learning leads network who will decide whether it might be valuable to share. To stop similar problems in the future the group may come back periodically with the aim to oversee the development of another core module. This would mean a core policy identified then consideration given to a single approach which would then be applied to the statutory learning.

- The gain for this work could be significant, highlighting its value.

### **Comments**

- Agreement with paper. The group were supportive of the paper, and there was an unanimous agreement that we need to invest in the work.
- There must be a decision made on the platform that all Boards should use, whether that be TURAS or Learnpro. This will require a lot of change to Boards using the retired platform and requires leadership from chief executives and HRDs. The alternative is finding a way to make both platforms communicate with each other effectively. The group can make recommendation on what is the most cost effective and logical decision.
- Both platforms do have issues, for example, TURAS has reporting delays.
- Groups within each Board will be set up with SME, L&D, digital leads and in process of agreeing weighted scoring methodology for deciding core modules.

### **Outcome**

- SWAG Secretariate noted the update, and agreed that this work should continue.

### **Agenda Item 3: Sub Vaccine Strategy**

- Laura Wilson (LW) is introduced to discuss the Sub Vaccine Strategy and the two key factors to be considered. COVID and Flu vaccines and the future eligibility to frontline health and social care workers. LW asks the group to discuss any concerns they might have.
- A sub plan strategy group as part of the SFIP National governance was commissioned by Christine McLaughlin, SG and Nick Finn from Public Health Scotland. The chair of the group is Doctor Emma Fletcher, Director of Public Health at NHS Tayside. There is a broad range of individuals across various sectors that are feeding into this work.
- There was a decision was made to remove frontline health and social care workers from the COVID vaccine programme from summer 2024, however, a policy decision was made to include them for winter 2024. Consideration is currently underway to determine if frontline workers should continue to receive the vaccine and after considering various data sets that SG currently hold about COVID and the impact on the health and social care workforce, it is deemed unlikely that frontline workers will continue to be offered a future COVID vaccine. A statement to that effect is currently being drafted that the group will review.
- In relation to the flu vaccine; reverting to business. Groups of people who received this during COVID have now been removed, such as 50- to 64-year-olds, teachers, prison staff etc.
- Additional discussion will take place during future JCVI (Joint Committee on Vaccination and Immunisation) meetings to discuss this followed by pulling

together advice which will go to ministers to reflect opinions from other departments across SG.

## Comments

- There was a group discussion around unnecessary exposure risk that a vaccine may bring, and it would be beneficial to have PHS advice around this.
- Broader definition around what 'frontline staff' means as sometimes this can change, such as staff in NHS 24, despite not being public facing they are critical staff members. If they aren't offered the vaccine and are too sick to work this will have a negative impact on the NHS emergency services. This must be considered.
- If approved by Ministers, the outcome will be two key workstreams. Communicating the decision change in terms of eligibility as well as looking at definitions and whether a COVID vaccine is to be offered.
- Concerns around uptake and the delivery of the vaccination programme were raised.
- The media reported a fairly small number of NHS staff were administered the flu vaccine during winter 2024 and subsequently many suffered with the flu. This may result in a rise in demand for it this year due to a difficult flu season in the recent months.
- How the decision of who is and who isn't frontline staff is communicated to people is important. Communication must include evidence-based guidance from PHS to back it up so that the staff/public are more understanding and accepting of the decision.

## Action

- Further discussions to take place with JCVI (Joint Committee on Vaccination and Immunisation) before ministerial recommendation is sent and the outcome is communicated.

## Agenda Item 4: Guidance Principles' work for problematic substance abuse

- Stuart Henderson (SH), Drug and Alcohol Policy team leader discussed the Drug Theft Task Force report on what should be done to support workforce development within the drug and alcohol workforce. From that, a workforce expert delivery group in SG assess the feasibility of the scope, the impact of 13 workforce development actions and priorities which need to be delivered first. 4 have been addressed over the past year.
- SH is looking for SWAG endorsement on the 'Guiding Principles' for supporting employees with lived and living experience of problematic substance use.



- The main purpose of the document is to raise the profile of the drug & alcohol workforce. Creating consistent standards across the health and social care sector, providing employers with the tools and knowledge on how to best support those with lived and living experience of substance use in the workforce. There is also a focus of supporting staff through recruitment and retention processes.
- There will be no additional ask for SG in terms of monitoring implementation, SG will support but no need to monitor or report. The aim of the document is to set out best practice and help employers to get the best out of their workforce, ensuring all staff are supported appropriately.
- The ideal outcome is that the Guiding Principles provide a solution to make peoples life easier.

## Comments

- Workforce Partnership, Practice and Experience Unit, have been liaising with SH in terms of the implementation of some of the principles set out in these documents for NHSScotland in developing alcohol and drug substance and abuse policy which is about to go to consultation as part of the 'Once for Scotland' programme. Important that information in the document for employers in Scotland encompasses and reflects our 'Once for Scotland' workforce policy.
- The Once for Scotland alcohol and drug substance & abuse policy aims to provide guidance in how we can support the individual into work and within the workplace.
- Concerns raised by the group around potential issues with Disclosure Scotland such as a person's status and the barriers, however, SH has been collaborating with Disclosure Scotland who are keen to help people back to work. The 'Guiding Principles' have been updated in response to this feedback and now link to detailed advice around navigating the Disclosure process.
- Breaking down barriers and judgment is an important part to supporting these individuals back into the workforce.

## Action

- Advised that SWAG Secretariat endorsed the 'Guiding Principles' "in principle". However, advised that greater socialisation within NHS Scotland was required before endorsement could be provided formally.
- SH invited by Jacqui Jones (JJ) to meeting with HRD's on 27<sup>th</sup> February.
- SH advised to also seek to engage with NHS Nursing Executive directors as part of that 'socialisation' process.

## Agenda Item 5: AOB

- Nil

Directorate for Health Workforce

Workforce Practice Unit

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**Next meeting scheduled for 6 March 2025, 15:00 – 16:00**

**[END]**